MANITOBA

ANNUAL REPORT

1983-84

Manitoba Health
Services Commission

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MANITOBA
HEALTH
SERVICES
COMMISSION

ANNUAL REPORT

FOR THE PERIOD
APRIL 1, 1983 TO
MARCH 31, 1984

MINISTER OF HEALTH

MANITOBA

MINISTER OF HEALTH
MINISTRE DE LA SANTÉ

WINNIPEG, MANITOBA
R3C 5R8

Winnipeg, June 29, 1984

Her Honour Pearl McGonigal
Lieutenant-Governor of the Province
of Manitoba

May It Please Your Honour:

I have the honour to submit the Annual Report of the Manitoba Health Services Commission for the 12-month period from April 1, 1983 to March 31, 1984.

Respectfully submitted,

L. L. Desjardins

The Honourable L. L. Desjardins
Minister of Health

MANITOBA
MANITOBA HEALTH SERVICES COMMISSION
Box 925
599 Empress Street
Winnipeg, Manitoba
R3C 2T6

Winnipeg, June 28, 1984

The Honourable L. L. Desjardins
Minister of Health
Province of Manitoba

Sir:

In accordance with Section 24 of The Health Services Insurance Act, I have the honour to present the Annual Report of the Manitoba Health Services Commission for the 12-month period April 1, 1983 to March 31, 1984.

Respectfully submitted,

Evelyn Shapiro
Chairperson
Manitoba Health Services Commission

1983/84 Annual Report

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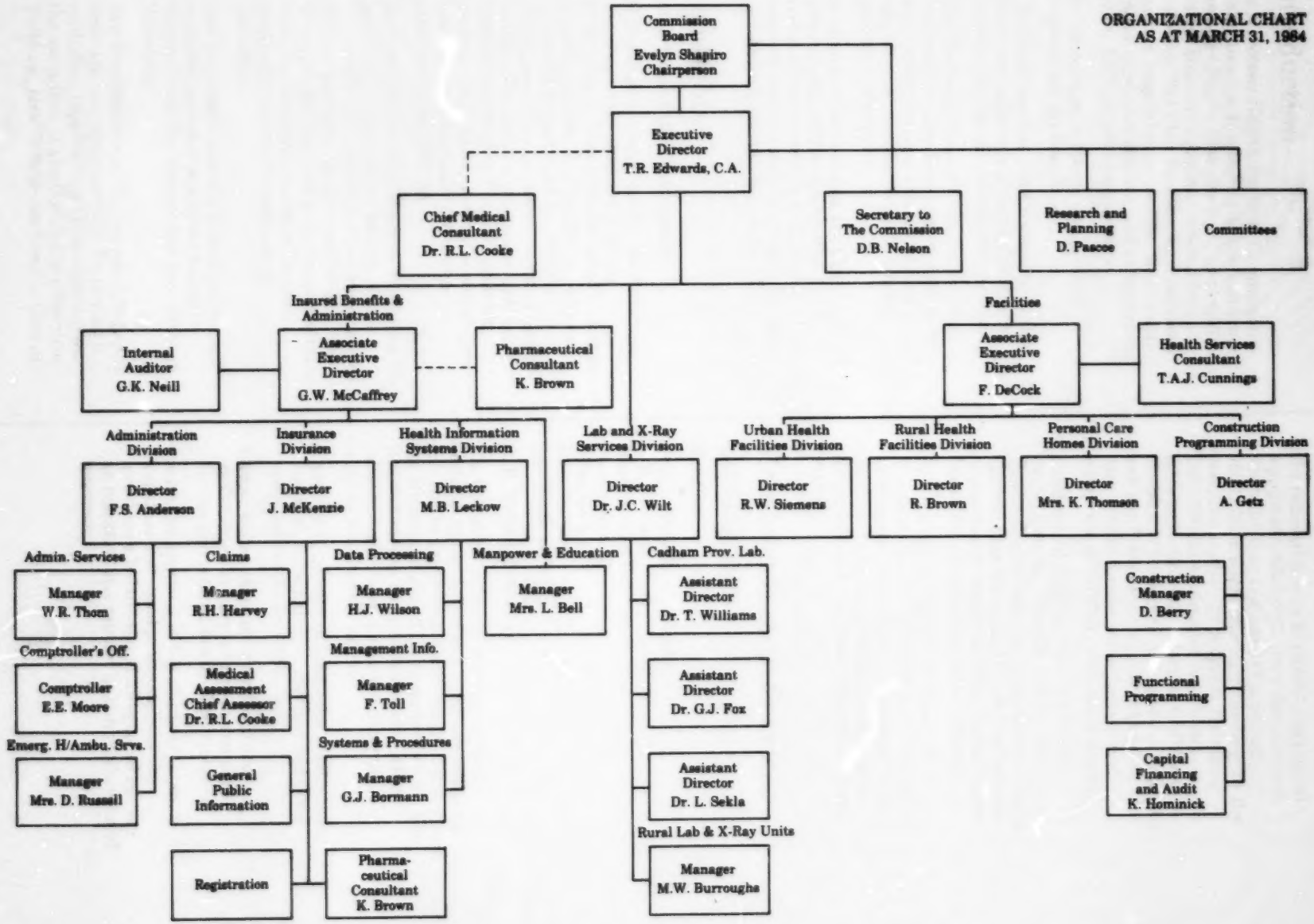
MANITOBA HEALTH SERVICES COMMISSION

ORGANIZATIONAL CHART
AS AT MARCH 31, 1984



Introduction

The Manitoba Health Services Commission administers the Manitoba Health Insurance Plan according to provisions of The Health Services Insurance Act and other relevant legislation. The Plan finances an integrated system of hospital care, medical treatment, personal care, pharmacare, and other health services for Manitoba residents.

The Commission supports two medical transportation programs:

- The Ambulance Grant Program provides financial assistance to municipalities to develop and operate ambulance services.
- The Northern Patient Transportation Program provides financial assistance to Manitobans living north of the 53rd parallel who require transportation to health centres in Manitoba.

This annual report reviews the Commission's programs; sets out its organization; and provides relevant statistics, financial statements and the auditor's report for the period April 1, 1983 to March 31, 1984.

Highlights

During 1983/84 the Commission:

- Maintained a health facility construction and renovation program totalling $141,564,413. This includes $39,477,110 for hospital projects, $4,665,000 for personal care home projects and $3,988,289 for contingency Fire Commissioner and health facility regeneration projects completed in 1983/84; plus $82,492,344 for hospital projects, and $10,941,670 for personal care home projects initiated and under construction in 1983/84.
- Saw the completion of the new Winnipeg Rh Institute, a $9.5 million facility at the University of Manitoba for the fractionation of blood products for western Canada. The Winnipeg Rh Institute is the second of three blood fractionation plants in Canada proposed to serve the needs of all Canadians.
- Saw the completion of a 20 bed psychiatric extended care unit at Grace General Hospital with the largest day care clinic in Winnipeg.
- Saw the completion of a two-year project to renovate and equip a centre for pediatric cardiology (the Variety Heart Centre) on the main floor of the Community Services Building, Health Sciences Centre. Cost of the renovation was $145,000 and capital equipment, $325,000. Over the past two years the Commission has provided $920,000 in supplementary funding for the pediatric cardiology program including $450,000 for equipment for a heart catheterization laboratory at Children's Hospital. The Centre will provide Manitoba and north-western Ontario with an up to date service for the investigation and treatment of children with heart disease.
- Commenced funding three additional health centres; Youville Centre, Women's Health Centre and the Occupational Health Centre. This brings to 12, the total number of community health centres funded under Manitoba's health insurance program.
- Saw the completion of "0" Block, St. Boniface General Hospital, a $4.5 million addition to house Manitoba's second C.T. Scanner and new radiological and other diagnostic and treatment equipment and services.

Manitoba Health Services Commission

Members:

Evelyn Shapiro, Chairperson
T. R. Edwards, C.A., Vice-Chairman
Sister Bertha Baumann
Dianne Howell
Allan Rosky
Rene Toupin
Sue Wood, M.D.

D. B. Nelson, Secretary

The Commission Board is responsible for performing the duties and functions assigned to it by the Lieutenant Governor in Council and the Minister of Health in accordance with The Health Services Insurance Act and other relevant legislation. Legislation specifically requires the Commission to:

- provide insurance to Manitoba residents for hospital, personal care, medical and other specified health services;
- ensure that adequate standards are maintained in hospitals, personal care homes and related health facilities; and
- with the approval of the Minister, plan, organize and develop throughout the province a balanced and integrated system of hospitals and related health facilities and services.

The Commission met six times during the year ended March 31, 1984 and dealt with a variety of issues. These included construction projects, budget policies and appeals, M.H.S.C. operating budget, composition and structure of health facility boards and insured health services. Twelve delegations were received and heard at meetings of the Commission regarding budget appeals and other matters.

Medical Review Committee

Members:

P. G. W. A. Lommerse, M.D., Chairman
D. McQueen, M.D.
W. G. Warrian, M.D.
A. A. Earn, M.D.
S. Kay, M.D.
A. G. Rogers, M.D.
M. Wahn, Ph.D.

N. Yourechuk, Secretary

The Medical Review Committee, established under The Health Services Insurance Act, reviews patterns of medical practice. It is composed of nominees of the Manitoba Health Services Commission, the Manitoba Medical Association and the College of Physicians and Surgeons.

From April 1, 1983 to March 31, 1984 the committee met 20 times. It heard appeals from eight physicians regarding assessment of their claims by the Manitoba Health Services Commission and reviewed 243 physicians' patterns of practice. Explanations were found for 197 of these patterns. The remainder were subject to one or more of the following actions:

- 46 physicians were notified by letter that their patterns of practice varied from the peer average and were under review. Three physicians provided acceptable explanations.
- The Committee corresponded with four physicians in an attempt to obtain explanations for their departures from the average.

The committee formally reviewed the patterns of practice of three physicians in addition to continuing a formal review that commenced in 1982.

One physician was ordered to repay the sum of $31,713.10. This order has been appealed to a Board of Arbitration. Orders are being prepared in the other two cases.

As of March 31, 1984, 36 physicians' patterns of practice were at various stages of review.

In addition to the above, the committee:

- Determined that a physician billed for services not rendered because of a misinterpretation of the fee schedule and referred the matter to the Manitoba Health Services Commission for recovery.
- Sent a letter to all members of the profession regarding the composition, duties and functions of the Medical Review Committee.
- Met on a number of occasions with representatives from the Manitoba Medical Association, the Manitoba Health Services Commission and the College of Physicians and Surgeons of Manitoba to discuss the structure of the committee and the concept of the medical review.

Dental Review Committee

Members:

C. Foster, B.D.S., M.S.C., Chairman (To January 10, 1984)
D. Chimilar, D.M.D., Chairman (From February 29, 1984)
L. Cogan, D.M.D. (To September, 1983)
I. Micflickier, Periodontist (From July 26, 1983)
S. Muchnik, D.D.S. (To January 10, 1984)
M. Neville, D.M.D. (To June 28, 1983)
J. Werner, D.M.D. (From February 22, 1983)
B. Friesen, D.M.D. (From March 27, 1984)
G. Potter, D.M.D. (From March 27, 1984)

The Dental Review Committee monitors claims for dental surgery and related hospital services, analyzing claim forms for dentists and hospitals with dental certificates and, in some cases, x-rays.

From April 1, 1983 to March 31, 1984 the committee met eleven times and reviewed 4,474 hospital and dental claims to determine whether these qualified as insured services. Based on this review twelve claims were rejected and the fees billed for thirteen claims were adjusted.

Pharmacare Committee

Members:

K. Brown, B.Sc.Pharm., Chairman
M. Morry, B.Sc.Pharm.
A. Bell, B.Sc.Pharm.
A. Pringle, B.Sc.Pharm.
R. Sanders, B.Sc.Pharm.
J. Boyko, B.Sc.Pharm.
A. Orlikow, B.Sc.Pharm.

The Pharmacare Committee is composed of pharmacists from government and private practice. Its dual purpose is to provide professional guidance in determining which drugs should be included as benefits under the Pharmacare Program and to maintain continuing contact with practicing pharmacists.

During the year the committee met to review administrative procedures related to the Pharmacare Program and to recommend revisions to the schedule of eligible drugs.

Medical Appointments Review Committee

Members:

J. Zuken, Q.C., Chairman (To November 9, 1983)
I. Trueman, Vice-Chairman
E. Backman
F. P. Doyle, M.D.
D. Gerrie (From November 9, 1983)
R. G. Handford, M.D.
J. F. S. Hughes, M.D.
D. N. C. McIntyre, M.D.
M. J. D. Newman, M.D. (To November 9, 1983)
G. Patrick
I. C. Peever, M.D. (To November 9, 1983)
W. H. Pendree
H. M. Ross, M.D. (From November 9, 1983)
K. J. Woodman, M.D. (From November 9, 1983)

D. B. Nelson, Secretary

The Medical Appointments Review Committee was established in 1973 to hear appeals filed by physicians whose applications for medical staff privileges have been refused or whose privileges have been reduced or terminated. It also hears appeals concerning applications which have not been attended to within a reasonable time. No appeals are heard unless applicants have exhausted all rights of appeal at the hospital concerned.

The Committee did not receive any formal appeals during the year ended March 31, 1984.

Access and Confidentiality Committee

Members:

K. Brown, M.D., Chairman, College of Physicians and Surgeons of Manitoba
W. J. Blight, M.D. (To January 19, 1984), St. Boniface General Hospital
N. Donen, M.D. (From March 3, 1984), St. Boniface General Hospital
G. Fletcher, Manitoba Health Organizations, Incorporated
B. J. Kaufman, M.D., Health Sciences Centre
S. Morris, Manitoba Medical Association
S. Storry, Manitoba Health Record Association

F. Toll, Secretary, Manitoba Health Services Commission

This committee advises the Commission on confidentiality and appropriate access to health data in the Commission's computerized information system.

From April 1, 1983 to March 31, 1984 the committee met six times. Twelve requests for access to Commission data were considered. Eleven were recommended for Commission approval; one was not.

The committee also developed guidelines for assuring the scientific merit of proposed research projects requiring Commission data, and prepared procedures for researchers to follow when contacting potential survey subjects for interviews.

Standing Committee on Medical Manpower

Members:

G. Johnson, M.D., Chairman, Manitoba Health Services Commission
R. J. Boyd, M.D., Manitoba Medical Association
C. Dow, M.D., Manitoba Medical Association
G. Gelowitz, Manitoba Health Organizations, Incorporated
A. Goldstein, Universities Grants Commission
R. Redekop, M.D., College of Physicians and Surgeons of Manitoba
H. J. Gilmour, Urban Municipalities Association
R. Sigurdson, Union of Manitoba Municipalities
C. Black, M.D., Professional Association of Residents and Interns of Manitoba
J. A. Hildes, M.D., University of Manitoba
B. Postl, M.D., University of Manitoba
T. Williams, M.D., Cadham Provincial Laboratory
R. Brown, Manitoba Health Services Commission
D. Pascoe, ex-officio, Department of Health

D. Krack, Secretary, Manitoba Health Services Commission

The following offered special assistance:

J. Wilt, M.D., Assistant Deputy Minister, Community Health Programs, Department of Health

T. A. J. Cunnings, Ph.D., Manitoba Health Services Commission.

The Standing Committee on Medical Manpower is appointed by the Minister of Health and the Minister of Education and reports to both Ministers. It monitors Manitoba's need for physicians, addresses problems of supply and maldistribution of physicians and recommends corrective action. It is financed by the Manitoba Health Services Commission.

The committee regularly reviews trends in physician population.

On March 31, 1984 there were 1,823 physicians and surgeons registered with the Manitoba Health Services Commission, a net increase of 98 physicians since March 31, 1983.

The ratio of physicians to population in Manitoba compares favourably with the national average.

Vacancies continue to exist in some rural localities and in some specialty areas. The latter condition is nationwide. To redress these shortages the committee oversees a government incentive program.

This program supports medical students in summer job experience in rural areas; offers loans to senior students who agree to practice in an underserviced area; offers rural residencies at the University of Manitoba to physicians who wish post-graduate training in specialties needed in rural areas; and makes incentive grants to physicians wishing to establish practice in a medically underserviced area. Details of this program are to be found in the Annual Report of the Standing Committee on Medical Manpower.

The committee also monitors physician immigration as approved by federal and provincial immigration authorities.

Eligibility for Insured Health Services and Benefits

All Manitoba residents are entitled to insured health benefits provided by the Manitoba Health Services Commission. This applies when they are in Manitoba or when visiting elsewhere. When health services are required as the result of injuries through the negligence of a third party, all or part of the costs are recoverable from insurance companies.

Newcomers from other provinces or territories establishing permanent residence in Manitoba must wait three months for all benefits, except residence in a personal care home (see last two paragraphs). During this three-month period, new residents may retain health insurance coverage with the plan of their former province or territory. Manitobans leaving the province permanently are provided with coverage for a similar period under the Manitoba Plan.

If a person is moving from another country to take up permanent residence in Manitoba, benefits are available on the date of arrival in Manitoba.

New residents are required to register themselves and their dependants with their employer, with the municipality where they live, or with the Commission.

Former residents of Manitoba, who previously resided in this province for 30 years or more, are eligible for personal care home benefits on the date of their return to Manitoba as permanent residents provided they qualify for placement in a personal care home as determined by an assessment panel.

Newcomers to Manitoba and former residents with less than 30 years residency are eligible for personal care home benefits after living in Manitoba for 24 consecutive months, again provided they can comply with the requirements of an assessment panel.

Hospital Program

The costs of hospital services and hospital construction constitute the largest expenditures for health care administered by the Commission.

Hospital Insured Services

Health services provided to persons in hospital as insured services are:

- standard ward accommodation and meals (for preferred accommodation a hospital may bill a patient directly)
- necessary nursing services
- laboratory, radiological and other diagnostic procedures
- drugs, biologicals and related preparations
- use of operating room, case room and anaesthetic facilities
- routine surgical supplies
- radiotherapy, physiotherapy, occupational and speech therapy

Most out-patient services are insured. In some cases the hospital may charge for take-home supplies of drugs and dressings.

In 1983/84 a total of $539.3 million was paid for insured hospital services. This included 1,769,737 insured days for separated patients; 1,687,196 for adults and children, and 82,541 for newborns.

During 1983/84 ultrasound services at the teaching hospitals were upgraded with expenditures of $300,000 for the Health Sciences Centre and $200,000 for the St. Boniface General Hospital.

Further decentralization of ultrasound services was accomplished with approval of services at Victoria General Hospital, Winnipeg; and Bethel Hospital, Winkler; the latter to serve the south-central area of the province.

For each hospital, ultrasound capital costs are approximately $150,000 and annualized operating costs are expected to be $100,000.

In addition to the above, ultrasound services are available at the Misericordia and Grace Hospitals in Winnipeg, at Brandon General Hospital, at Dauphin General Hospital and at The Pas Health Complex. An obstetrical ultrasound outreach visiting program for rural areas is provided from the Health Sciences Centre and St. Boniface General Hospital.

The Provincial Renal Disease Program continued to expand in 1983/84. Coordinated by St. Boniface General Hospital and the Health Sciences Centre, this program offers home and hospital dialysis.

Hospital dialysis was expanded with completion of a new central dialysis unit at the General Hospital, Health Sciences Centre, at a total cost of $1,400,000. The new unit has 13 stations, more than double the former capacity.

Hospital Construction

In 1983/84 capital costs of completed hospital construction totalled $43,465,399.

This amount is made up of 11 major projects and 24 emergency, Fire Commissioner and health facility regeneration projects. The major projects were Selkirk General Hospital; the Women's Centre, Health Sciences Centre; "0" Block, St. Boniface General Hospital; the day hospital, Municipal Hospitals; Psychiatric Extended Treatment Unit, Grace General Hospital; the Winnipeg Rh Institute; Arborg Hospital; renovations to Hamiota Hospital; McEwen building alterations and new laundry, St. Boniface General Hospital; and air conditioning for intensive care units, Health Sciences Centre.

In 1983/84 construction commenced on eight projects at a total cost of $82,492,344. The projects are: Adolescent Psychiatric Treatment Centre; Children's Hospital, Medical Support Services Building, Haemodialysis relocation, fire safety upgrading, Health Sciences Centre; Gladstone Hospital, St. Claude Hospital and Dauphin General Hospital.

Personal Care Home Program

The Personal Care Home Program provides insured benefits for persons residing in personal care homes who have been assessed as requiring a specific level of care. Benefits under the program include the following:

- accommodation at the standard ward level
- meals, including special and therapeutic diets
- necessary nursing services
- routine medical and surgical supplies
- prescribed drugs, biologicals and related preparations approved by the Commission
- physiotherapy and occupational therapy services
- routine laundry and linen services
- other goods and services approved by the Commission

Residents of personal care homes pay a daily residential charge. At March 31, 1984 this was $13.00.

In 1983/84 a total of $138.6 million was paid for insured services in personal care homes. This comprised approximately 2.9 million resident days.

Construction Program

During 1983/84 three personal care home projects at Morden, Glenboro and Grunthal were completed at a total cost of $4,665,000.

In 1983/84 a construction program totalling $10,941,670 was initiated for six new and renovated personal care home projects at Reston, Lac du Bonnet, Selkirk, Steinbach, Carman and Brandon.

Adult Day Care

The Adult Day Care Program is a health-social service program with the objective of strengthening the individual's ability to remain independent in his or her home or community. A research project to assess the impact of the program will be completed in 1984/85. Preliminary results

indicate that Adult Day Care reduces hospital use by participants, increases their life satisfaction and provides periodic relief to families offering care.

During 1983/84 the Adult Day Care Program was enlarged to provide 35 Adult Day Care Programs, providing 26,919 days of care to an average of 540 persons at any one time. This was a 28.3 percent increase in days of care and a 25.3 percent increase in people served over 1982/83.

Respite Care

The Respite Care Program began in 1980 in personal care homes choosing to participate. It offers intervals of relief to families providing care for dependent relatives.

In 1983/84, 285 persons were served totalling 470 cases and 6,974 days of care in 24 personal care homes. This was a 20.5 percent increase in the number of cases and a 16.3 percent increase in the number of days over 1982/83.

Task Force on the Young Disabled in Personal Care Homes

In January, 1983 an interdepartmental Task Force on the Young Disabled in Personal Care Homes was established under the chairmanship of the Director of the Personal Care Homes Division. The Task Force was to identify the nature of the needs and concerns of the young disabled in personal care homes. In addition, it examined options in living accommodations and Home Care services available to the young disabled.

Medical Program and Other Health Services

The medical program provides insured physician services in facilities, in the physician's office or in the patient's home. Rates of payment for various medical procedures are based on a Schedule of Benefits which is negotiated between the Commission and the Manitoba Medical Association. In 1983/84 the Commission processed 6,961,677 physicians' claims totalling $168.9 million.

Also insured are certain services provided by optometrists, chiropractors and dental surgeons.

Optometric benefits include a complete eye examination with refraction and prescription performed annually or as medically required. The initial fitting and cost of contact lenses following congenital cataract surgery is insured. In 1983/84 the Commission processed 180,607 optometric claims totalling $3.9 million.

Chiropractic services are insured up to a maximum dollar amount for each family for benefits received during a calendar year. In 1983/84 the Commission processed 417,223 chiropractic claims totalling $6.5 million.

Insured dental services include certain surgical procedures when performed in a hospital by registered dentists or oral surgeons. In 1983/84 the Commission processed 5,747 dental claims totalling $1.2 million.

The cleft lip/palate program insures the cost of routine dental maintenance, prosthetics, including crowns and bridges, and services of orthodontists for children under 18. In 1983/84 the Commission processed 571 cleft lip/palate claims totalling $83,494.

Specific prosthetic and orthotic devices and services, including certain limb and spinal braces, are also covered when prescribed by a medical practitioner. In 1983/84 the Commission paid for 14,692 services amounting to $1.7 million.

Breast prostheses and surgical brassieres are insured up to a maximum limit of $125 per prosthesis. The program allows two prostheses to be purchased every four years for a single mastectomy or four for a double mastectomy. A subsidy of $10.00 per surgical brassiere up to a total of two brassieres in each 12-month period is provided. In 1983/84 the Commission processed 1,800 claims for mastectomy prostheses totalling $123,700.

For children under 18 the Hearing Aid Program provides for reimbursement of 80% of the cost of a hearing aid every four years and approved services in excess of a deductible amount of $75.

Additional hearing aids may be subsidized during the four-year period if they are medically required and if the purchase is supported by a statement from an otolaryngologist or an audiologist. In 1983/84 the Commission processed 105 audiological claims totalling $35,800.

Orthopedic shoes are insured for children under 18. The Commission pays 50 percent of the cost of stock shoes up to a maximum benefit of $23.65; 50 percent of the cost of shoes for children with different sized feet to a maximum benefit of $35.50; and 50 percent of the cost of custom-made shoes to a maximum benefit of $118.25. Four dollars and seventy-five ($4.75) per pair of shoes is allowed for alterations. Insured purchases are

limited to two pairs of shoes in 12 months. In 1983/84 the Commission processed 1,096 claims totalling $22,700.

The Commission insures telecommunications devices for the profoundly deaf. This equipment makes it possible to conduct telephone conversations by keyboard and display terminal. Qualified purchasers of such equipment receive 80 percent of the cost in excess of a deductible amount of $75 to a maximum of $364. In 1983/84 the Commission processed 39 claims for such devices totalling $12,300.

The Commission partially insures eyeglasses for persons over 65. This program pays 80 percent of the cost towards approved maximum amounts for prescribed eyeglasses including dispensing fees, lenses and standard frames over a deductible amount of $50. In 1983/84 the Commission processed 18,543 claims for eyeglasses totalling $652,300.

Laboratory and X-Ray Services Program

Primary and reference services for rural and urban areas of Manitoba are implemented through the Laboratory and X-ray Services Program (LAXUS). Quality control programs in microbiology are provided for the Cadham Provincial Laboratory in Winnipeg, and LAXUS Units in the field.

In rural areas, hospitals and their associated communities receive laboratory, radiological, electrocardiographic and diagnostic ultrasound services through the local and regional diagnostic units. In 1983, two diagnostic units at Selkirk and Steinbach secured on-site radiologists. Wawanesa joined the LAXUS diagnostic program.

In the microbiology section of the Cadham Provincial Laboratory there has been a large increase in the submission of specimens by physicians to confirm the diagnosis of infections caused by Chlamydia trachomatis. Newer ways of diagnosing this agent are being assessed. These include the use of monoclonal antibodies and enzyme immunoassays.

Recent advances in the virus laboratory include rapid reliable Herpes simplex virus typing and rapid techniques for detection of viruses causing enteric and respiratory infections. Hospital outbreaks of enterovirus infections in newborns and children were studied.

The virus laboratory runs a provincial influenza surveillance program providing data from which assessment of epidemic periods of influenza infection and future needs for influenza vaccine can be made.

The serology section introduced a test for the diagnosis of systemic lupus erythematosus, an auto-immune disease frequently suspected on clinical grounds.

The parasitology section started a study of cryptosporidiosis in Manitoba. Cryptosporidium has recently been recognized as an important cause of diarrhea in immuno-compromised persons. It is present in Manitoba causing outbreaks of neonatal diarrhea in calves.

The environmental microbiology section was involved in a study of the microbiological hazards of spray irrigation of farms using sewage lagoon effluents. Also, recreational waters collected from several beaches along Lake Winnipeg were tested. Another study sponsored by the City of Winnipeg measured the microbiological load of wading pool waters in an attempt to determine the effect of filtration. During the year, whirlpools and swimming pools were routinely tested for pseudomonas, a bacterium capable of causing skin and ear infections. Both the serology and environmental microbiology sections were involved in monitoring for western equine encephalitis; the 1983 outbreak caused infections in 18 humans and 23 horses.

During 1983/84 the Metabolic Diseases Screening Programs continued to test all newborns in the province, about 16,500 per year, for thyroid, carbohydrate and amino acid disorders. These screening tests are designed to detect many diseases before they cause irreparable damage to the infant. During the year, the program identified one neonate with galactosemia, five with congenital hypothyroidism, one with cystinuria, two with histidinemia as well as two institutionalized, retarded adults confirmed to have phenylketonuria (PKU). The latter patients were born before the neonatal screening program was in place and it is to the credit of the program that no persons have been institutionalized with PKU since the program began in 1965.

A computer program has improved the laboratory's ability to identify health trends and to provide immediate and comprehensive responses to physician enquiries. In 1983/84 the laboratory switched over its history file and reporting mechanism in clinical microbiology and virus isolation to computer.

Pharmacare Program

The Pharmacare Program protects Manitobans from financial hardship resulting from expenses for prescription drugs. In 1983/84 this program covered 80% of the costs of eligible prescription drugs in excess of an initial deductible amount of $50 for persons 65 years of age and over and their families. For persons under 65 the deductible amount was $75.

Advice and guidance on the listing of currently eligible drugs and other matters relating to the Pharmacare Program is provided to the Commission by a committee of representatives of the Manitoba Pharmaceutical Association.

In 1983/84 the Commission processed 145,000 claims totalling $21.5 million.

Northern Patient Transportation Program

Since September 1977 the Northern Patient Transportation Program (N.P.T.P.) has paid ground and air transportation costs for emergencies and urgent hospital-to-hospital transfers as well as transportation costs for certain elective cases. To be eligible northern patients must require medical transportation from within the following areas:

- North of the 53rd parallel from the Saskatchewan boundary to Lake Winnipeg; and
- North of the 51st parallel from Lake Winnipeg to the Ontario boundary.

Under this program emergency and urgent hospital-to-hospital transportation is administered by the Commission while transportation for elective hospital and medical treatment is administered by local regional authorities.

Some specific benefits include:

- return transportation for patients transferred from hospitals in northern Manitoba to any other hospital in the province;
- return transportation for persons requiring elective hospital and other medical treatment which is not available at their place of residence;
- return transportation for a patient's escort who may be a doctor, nurse, parent or other authorized person;
- escort's reasonable overnight room and board expenses.

In 1983/84 there were 12,361 transportation warrants processed under the program. The amount paid by the Commission for the program was $2.5 million, an increase of some 11.8 percent over 1982/83. The actual number of warrants issued remained relatively constant with the previous year.

Emergency Health Services Program

Planning comprehensive, province-wide responses to health emergencies during times of disaster, co-ordinating emergency transportation and evacuation procedures, and allocating supplies and equipment under extreme circumstances, are key components of the Emergency Health Services Program. Also, the Commission assists individual hospitals and personal care homes in developing written plans to cope with local internal and external disasters. The Commission also assists facilities with the planning for mock disaster exercises which are undertaken to ensure the feasibility of disaster plans. During the year, 19 such exercises were conducted, including two simulated municipal airport disasters.

The threat of western equine encephalitis resulted in Emergency Health Services staff preparing and distributing information to all facilities in threatened locations. Also, Commission staff were provided for the health desk at the Provincial Information Centre.

During September forest fires on the east side of Lake Winnipeg threatened communities in Manitoba and northwest Ontario, and authorities mounted a massive fire-fighting effort. Emergency Health Services, for the first time, was requested to provide first aid/medical assistance for the fire fighting crews.

A roster of ambulance attendants and three Commission staff members provided a cadre of five persons, one at each of five camp sites. A minimum stay of four days each was the average from September 3 to 16. Public Health nurses provided care for evacuees temporarily housed at the Gimli Industrial Park, with housing and feeding supervised by Emergency Social Services. Additional Emergency Health Service beds and blankets were moved to this site in the event further evacuees from northwestern Ontario were to arrive.

Ambulance Services Program

The Manitoba ambulance services program is an annual grant assistance program to municipal governments based on per capita payments from the Commission to

municipalities requesting assistance in providing ambulance service. The grants may be applied towards the purchase of ambulance vehicles and equipment or to subsidize operating costs. During 1983/84, 1,500 licensed volunteer drivers or driver/attendants operated 127 ambulances throughout the province, with 185 municipalities and towns plus 19 local government districts receiving approximately $1.9 million in grants under the program.

Each ambulance service and all drivers and driver/attendants are licensed on an annual basis. The majority of drivers and driver/attendants are community volunteers, except in Winnipeg, Brandon, Thompson, Selkirk and Flin Flon, which have full-time staff. Ambulance vehicles and equipment are inspected to ensure compliance with minimum standards.

The training program for ambulance personnel has now certified 400 people at the First Responder level. This program was developed and co-ordinated by staff and delivered throughout the province by 50 certified volunteer instructors.

Ambulance training is now reviewed and approved by a provincial medical advisory board made up of emergency room physicians and ambulance personnel. Specific performance criteria are being drawn up to guide pre-hospital care providers through critical situations.

Administration

On March 31, 1984, the Commission employed 661 people compared to 660 on March 31, 1983. This includes several positions filled by two job-sharing employees. The Commission's administration costs in 1983/84 were $13.1 million or 1.4 percent of total expenditures.

During 1983/84 the Commission provided work experience for 11 students. Secretarial and clerical duties were performed by eight students enrolled in high school and college programs and three students attending the Manitoba School for the Deaf.

The Commission supported the Manitoba Government's commitment to the Core Initiatives Training and Employment Program by employing two Core candidates in term positions and one Core candidate who, on successful completion of six months' training and probationary period, will be appointed to a regular position. The Commission also provided work experience for another Core candidate for a specific period of her training program.

In the summer of 1983, the Commission employed 11 students through the Student Temporary Employment In-Government Program (S.T.E.P.) to assist with a variety of projects, including several related to health research.

During the year, 45 University of Manitoba fourth-year medical students attended five educational seminars at the Commission. Senior staff representing various Commission divisions participated in two-hour sessions consisting of presentations, a question and answer period, and a tour. The meetings are designed to provide students with an overview of the Commission's organization, functions, and programs. The Faculty of Medicine, at whose request the seminars were initiated several years ago, considers these meetings an important component of the students' education. Two recent medical graduates, enrolled in the Faculty of Medicine's Community Medicine Residency Program, spent a total of six weeks at the Commission obtaining an overview of its operation.

Research and Planning

A Research and Planning Directorate was established in 1982 to consolidate research and planning for the Department of Health and the Manitoba Health Services Commission. The directorate coordinates the planning of the various health services funded through the Manitoba Health Services Commission with public health, home care, mental health institutions, community mental health, and other regional services provided by the Department of Health.

The directorate reviews reports and research proposals for federal and/or provincial health funding. It evaluates reports and conducts analyses for the Manitoba Health Services Commission and the Department of Health.

The directorate produces reports on health care practitioners as required, including comments on proposed Acts of the legislature governing health professions. The directorate represented the Department of Health and the Manitoba Health Services Commission on several health care practitioner-related committees at the provincial, interprovincial and federal-provincial levels.

During 1983, the directorate provided staff support for a review of mental health services with the director serving as chairman of the Mental Health Working Group. The purpose of the review was to rationalize service delivery and determine administrative efficiency of existing mental health programs in Manitoba. The Minister of Health released the report of the Mental Health Working Group to the public in November, 1983.

During 1983/84 other projects undertaken by the directorate include the following:

- A review of residential care facilities throughout the province.
- A review of medical emergency transportation services.
- The establishment of a pilot program for maternity early discharge in conjunction with public health services and the St. Boniface General Hospital.
- Utilization-based study of physician manpower.
- A study of all geriatric day hospitals.
- The establishment of a Health Services Review Committee to examine many pressing health care issues with representatives from non-government organizations.
- Regular consultation with the First Nations Confederacy about special health concerns of Status Indians.

Introduction to Statistical Section

The number and cost of Manitoba's insured health services are documented in this section. The registered population is included to illustrate rates of utilization for Manitoba residents. Calculations of the number and cost of medical services and patient days per 1,000 population allow comparison with similar data from other provinces.

TABLE I is an analysis of the population of Manitoba by health region, by age group and by sex. The population data are based on the Commission's records of residents registered with the plan.

M.H.S.C. HEALTH REGIONS MAP illustrates regional boundaries within Manitoba.

FIGURES I AND II BASED ON TABLE I illustrate the percentage of the population by health region and age group.

TABLE II records health services costs by program, during the five-year period April 1979 to March 1984. Overall costs for insured benefits illustrate cumulative increases for existing and new programs.

FIGURE III illustrates the cost increases shown in Table II in graphic format. It demonstrates the cumulative total costs of M.H.S.C. programs during the last five years.

FIGURES IVA TO IVD illustrate per capita costs for 1979/80 to 1983/84 for total insured health costs, hospital, medical, and personal care home services.

MANITOBA HOSPITALS MAP illustrates the geographic location and size of all Manitoba acute and extended care hospitals.

TABLE III documents the distribution of hospital and personal care home beds according to location by health region. It does not reflect the actual use of beds by residents of one region in hospitals in other regions.

FIGURE V illustrates hospital patient days per 1,000 population by region of residence, for 1982/83 and 1983/84.

TABLE IV documents the distribution of hospital cases and days for adults and children (excluding newborns) according to broad diagnostic categories. Basically the same diagnostic categories are used in Table IX which documents medical utilization. These two tables provide an overview of hospital and medical claims by disease entity.

TABLE V documents the rated bed capacity and net M.H.S.C. payments to each Manitoba hospital by hospital category and bed size during 1982/83 and 1983/84.

MANITOBA PERSONAL CARE HOME MAP illustrates the geographic location and size of personal care home outside of Winnipeg.

TABLE VI documents the distribution of personal care home residents by age, sex, and level of care as at March 31, 1984.

TABLE VII documents the rated bed capacity and net M.H.S.C. payments to each Manitoba personal care home by health region during 1982/83 and 1983/84.

TABLE VIII illustrates the distribution of health practitioners according to location by health region, based on M.H.S.C. payments over $30,000. The actual utilization of practitioners' services is not reflected in the ratio of population per practitioner.

FIGURE VI illustrates the medical services per capita cost by health region of residence, for 1982/83 and 1983/84.

TABLE IX documents the distribution of medical services and costs according to broad diagnostic categories (similar to Table IV for hospital cases and days).

FIGURE VII compares medical services per capita costs by select age groups and sex, for 1983/84. The significantly higher costs shown for females in the age group 15-34 reflects service costs related to child bearing.

TABLE X compares the average cost per patient by type of practice from 1979/80 to 1983/84.

TABLE XI shows the distribution of costs according to types of medical services, and the percentage distribution, for 1982/83 and 1983/84.

TABLE XII shows the number of medical practitioners with M.H.S.C. payments over $30,000, and the average and median payments by type of practice, for 1982/83 and 1983/84. Reference to the table's footnotes is important for correct interpretation.

TABLE XIII shows the number of dental and oral surgeons, optometrists, and chiropractors with M.H.S.C. payments over $30,000, and the average and median payments, for 1982/83 and 1983/84.

TABLE XIV illustrates the distribution and cost of medical and other health services by type of practice, for 1982/83 and 1983/84.

TABLE I

Manitoba Population by Health Region and Age Group, June 1, 1983.

REGION/AGE	0 - 14	15 - 24	25 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75+	TOTAL
CENTRAL									
Male	12,098	8,741	6,839	4,979	3,959	3,963	3,329	2,155	46,063
Female	11,542	8,105	6,361	4,855	3,998	4,308	3,605	2,852	45,626
Sub-Total	23,640	16,846	13,200	9,834	7,957	8,271	6,934	5,007	91,689
EASTMAN									
Male	11,183	7,539	6,093	4,684	3,431	3,075	2,312	1,298	39,615
Female	10,660	6,893	5,911	4,413	3,123	2,988	2,146	1,508	37,642
Sub-Total	21,843	14,432	12,004	9,097	6,554	6,063	4,458	2,806	77,257
INTERLAKE									
Male	8,821	6,428	5,182	4,274	3,399	3,197	2,562	1,315	35,178
Female	8,396	5,874	4,953	4,110	3,214	3,236	2,393	1,548	33,724
Sub-Total	17,217	12,302	10,135	8,384	6,613	6,433	4,955	2,863	68,902
NORMAN									
Male	13,541	8,113	6,833	4,489	2,836	1,982	1,092	608	39,494
Female	12,707	7,804	6,378	3,861	2,377	1,696	1,072	537	36,432
Sub-Total	26,248	15,917	13,211	8,350	5,213	3,678	2,164	1,145	75,926
PARKLAND									
Male	6,161	4,285	3,346	2,741	2,450	2,894	2,408	1,605	25,890
Female	5,683	3,915	3,179	2,562	2,365	2,795	2,424	1,882	24,805
Sub-Total	11,844	8,200	6,525	5,303	4,815	5,689	4,832	3,487	50,695
WESTMAN									
Male	13,793	10,549	8,965	6,432	5,586	6,027	5,201	3,294	59,847
Female	12,992	10,118	8,677	6,341	5,685	6,511	5,466	4,647	60,437
Sub-Total	26,785	20,667	17,642	12,773	11,271	12,538	10,667	7,941	120,284
WINNIPEG									
Male	63,023	53,904	54,019	37,337	28,846	26,824	18,166	9,900	292,019
Female	60,239	55,289	55,297	37,897	29,621	31,404	24,107	17,663	311,517
Sub-Total	123,262	109,193	109,316	75,234	58,467	58,228	42,273	27,563	603,536
MANITOBA									
Male	128,620	99,559	91,277	64,936	50,507	47,982	35,070	20,175	538,106
Female	122,219	97,998	90,756	64,039	50,383	52,938	41,213	30,687	550,183
TOTAL	250,839	197,557	182,033	128,975	100,890	100,900	76,283	50,812	1,088,289

NORMAN
Nelson House
Thompson
Norway House
PARKLAND
INTERLAKE
WINNIPEG
WESTMAN
CENTRAL
EASTMAN
M.H.S.C.
HEALTH
REGIONS

FIGURE I

Percentage Distribution of Population by Health Region, June 1, 1983.

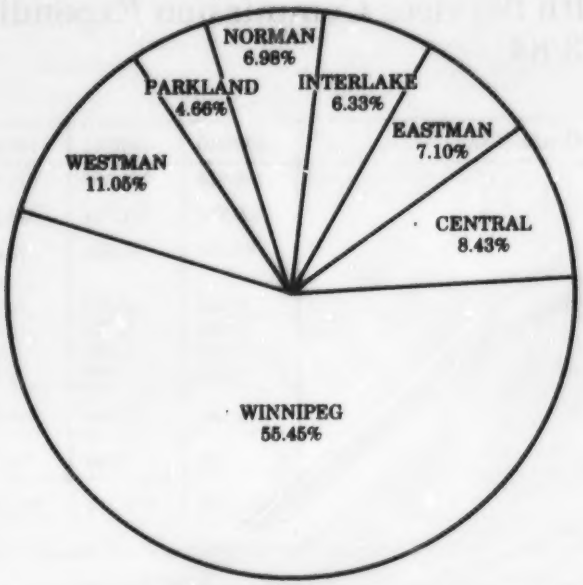


FIGURE II

Percentage Distribution of Population by Age Group, June 1, 1983.

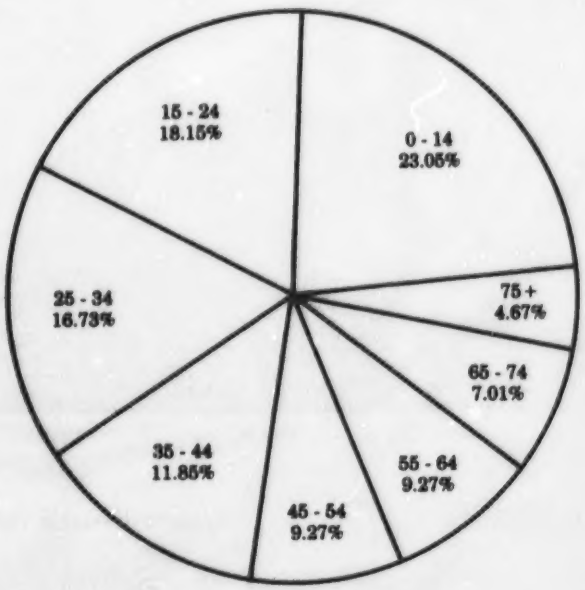


TABLE II

Manitoba Health Services Commission Expenditures, 1979/80 to 1983/84.

EXPENDITURES ($000's)	1979/80	1980/81	1981/82	1982/83	1983/84
Hospital Services[1]	288,814	341,995	418,659	486,894	539,299
Medical Services[2]	106,788	117,724	145,031	166,650	179,370
Personal Care Homes	70,559	81,678	99,958	121,102	138,575
Other Health Costs:					
Pharmacare	8,742	10,568	13,611	17,249	21,493
Other Health Services[3]	6,942	8,512	8,951	11,743	12,980
Ambulance Program	1,248	1,340	1,468	1,981	1,881
Northern Patient Transportation	1,200	1,466	1,879	2,204	2,465
Sub-Total Other Health Costs	18,132	21,886	25,909	33,177	38,819
M.H.S.C. Administration	8,325	9,036	10,[illegible]5	11,762	13,111
TOTAL	492,618	572,319	699,692	819,585	909,174

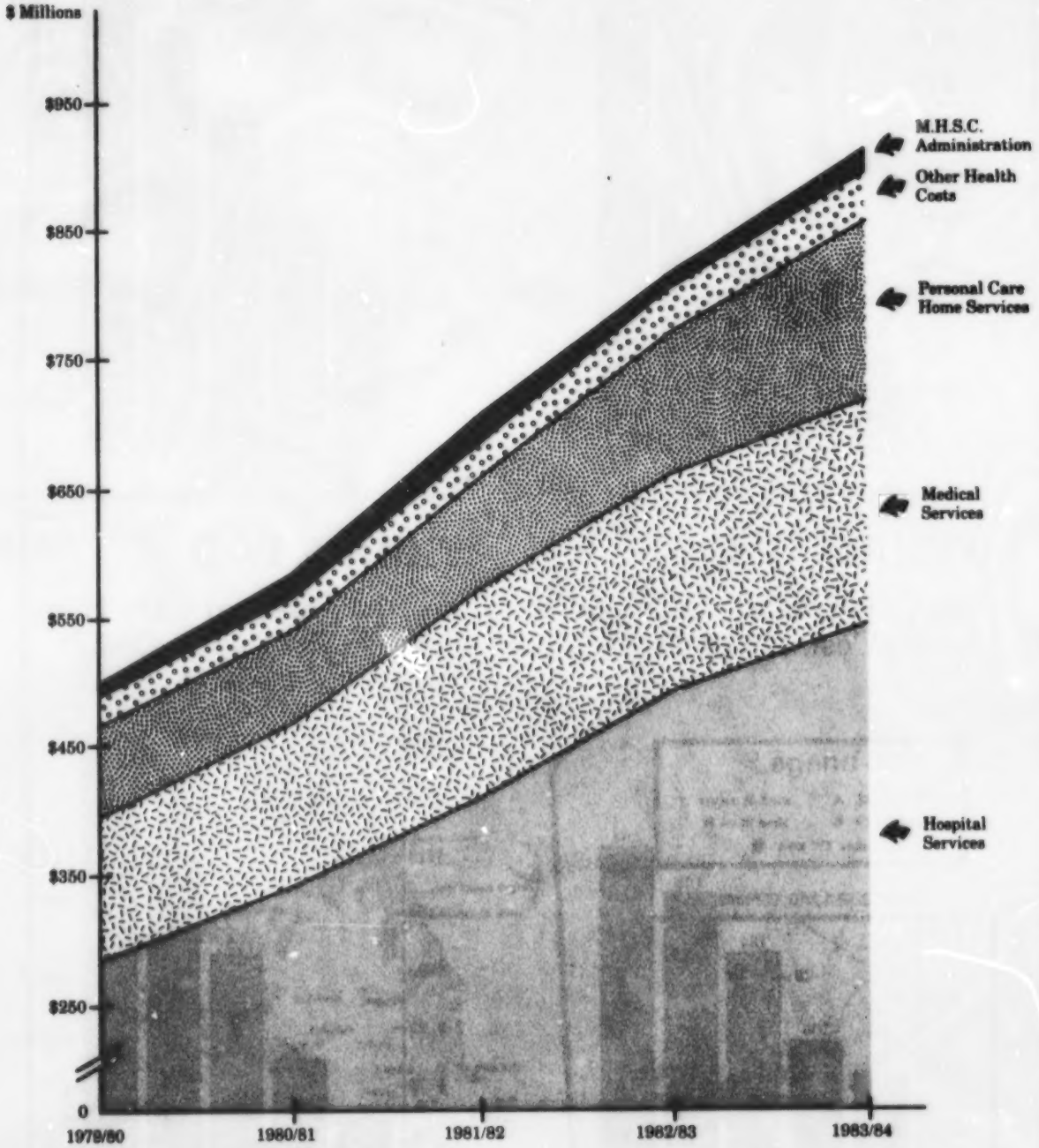
[1]Include Public General, Federal, Contract Facilities, Out-of-Province Facilities and Cadham Laboratory.

[2]Include Medical Fee-for-Service, Salary, and Private Laboratory and X-ray Facilities, Dental and Oral Surgery.

[3]Include Chiropractic, Optometric, Prosthetic and Orthotic Services.

FIGURE III

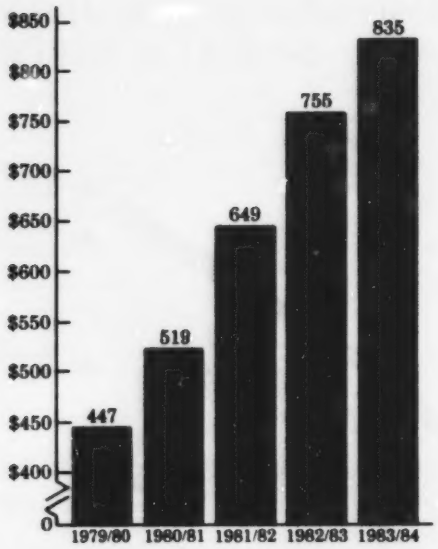
Manitoba Health Services Commission Expenditures, 1979/80 to 1983/84



Based on Table II M.H.S.C. Expenditures.

FIGURE IV A

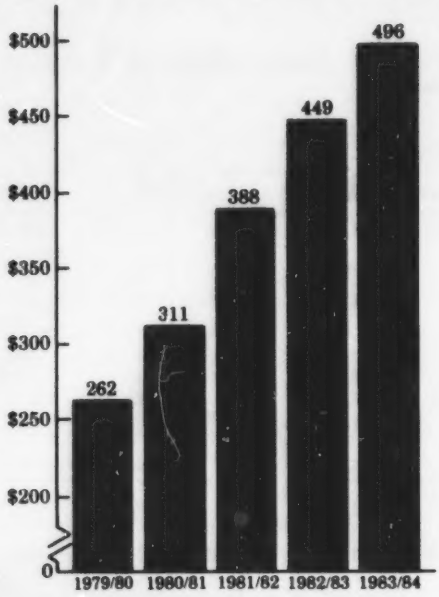
Total Health Services Per Capita Costs, 1979/80 to 1983/84



Based on Table II Total M.H.S.C. Expenditures.

FIGURE IV B

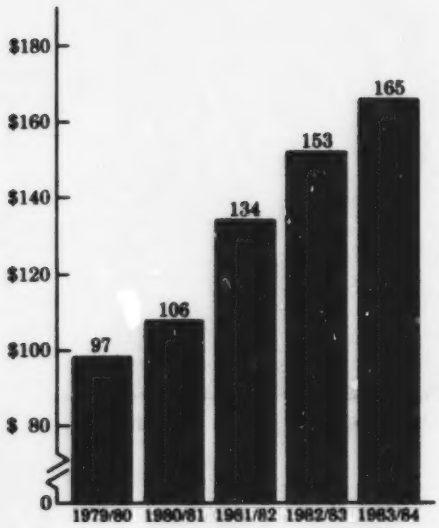
Insured Hospital Services Per Capita Costs, 1979/80 to 1983/84



Based on Table II Hospital Services Expenditures.

FIGURE IV C

Insured Medical* Services Per Capita Costs, 1979/80 to 1983/84

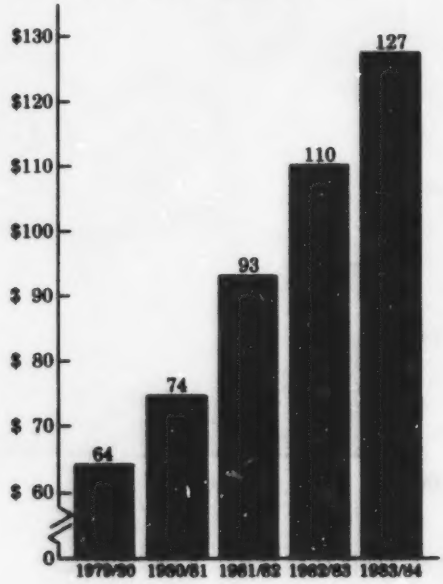


Based on Table II Medical Services Expenditures.

Includes Medical Services, Dental Surgery and Oral Surgery.

FIGURE IV D

Insured Personal Care Home Services Per Capita Costs, 1979/80 to 1983/84



Based on Table II Personal Care Home Expenditures.

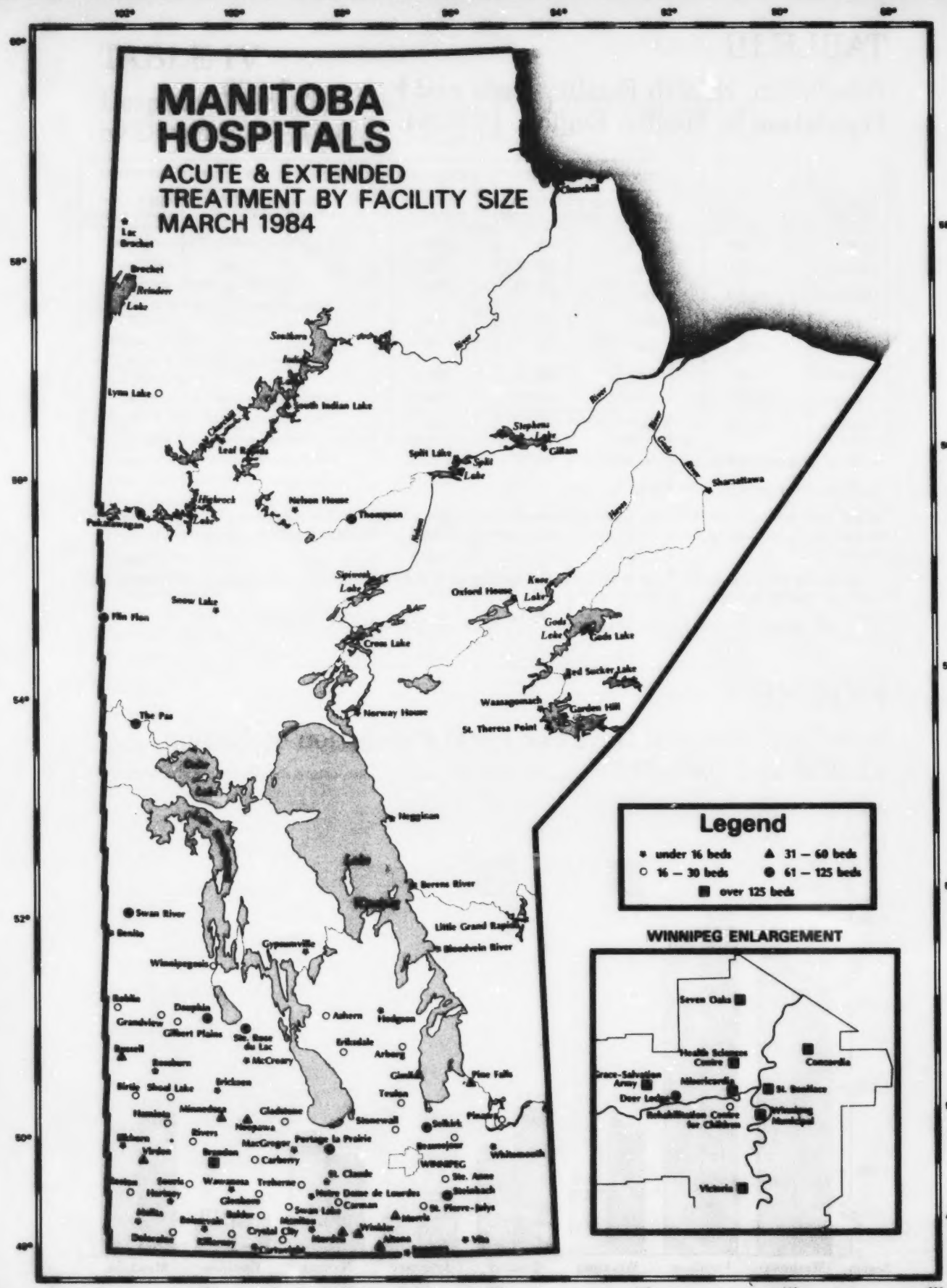

MANITOBA
HOSPITALS
ACUTE & EXTENDED
TREATMENT BY FACILITY SIZE
MARCH 1984
Legend
under 16 beds
16 – 30 beds
31 – 60 beds
61 – 125 beds
over 125 beds
WINNIPEG ENLARGEMENT
Seven Oaks
Health Sciences Centre
Concordia
Grace-Salvation Army
Misericordia
St. Boniface
Deer Lodge
Rehabilitation Centre for Children
Victoria
Churchill
Lac Brochet
Brochet
Reindeer Lake
Lynn Lake
South Indian Lake
Leaf Rapids
Split Lake
Stephens Lake
Gillam
Shamattawa
Nelson River
Hudson Bay
Nelson House
Thompson
Pukatawagan
Highrock Lake
Snow Lake
Flin Flon
Sipiwesk Lake
Cross Lake
Oxford House
Knee Lake
Gods Lake
Gods Lake
Red Sucker Lake
Wasagamack
Garden Hill
St. Theresa Point
Norway House
The Pas
Moose Lake
Moose Lake
Reggies
Lake Winnipeg
Berens River
Little Grand Rapids
Bloodvein River
Swan River
Benito
Gypsumville
Winnipegosis
Roblin
Dauphin
Grandview
Gilbert Plains
Ste. Rose du Lac
McCreary
Russell
Rossburn
Birtle
Shoal Lake
Erickson
Hamiota
Minnedosa
Gladstone
Neepawa
Rivers
Ashern
Hodgson
Eriksdale
Arborg
Gimli
Teulon
Stonewall
Selkirk
Pine Falls
Brunkild
Brandon
MacGregor
Portage la Prairie
Carberry
Virden
Elkhorn
Souris
Wawanesa
Treherne
Holland
Glenboro
Baldur
Crystal City
Boissevain
Melita
Deloraine
Killarney
Carroll
Carman
Swan Lake
Manitou
Morden
Winkler
Altona
Vita
St. Claude
Notre Dame de Lourdes
Ste. Anne
Steinbach
St. Pierre-Jolys
Lorette
Brunkild
Whitemouth
WINNIPEG

TABLE III

Population, Health Facility Beds and Rate per 1,000 Population by Health Region, 1983/84.

HEALTH REGION	POPULATION[1]	ACTIVE TREATMENT		EXTENDED TREATMENT		PERSONAL CARE HOME	
		BEDS[2]	PER 1,000 POPULATION	BEDS[2]	PER 1,000 POPULATION	BEDS[2]	PER 1,000 POPULATION
Central	91,689	437	4.8	50	0.5	756	8.2
Eastman	77,257	229	3.0	12	0.2	389	5.0
Interlake	68,902	223	3.2	—	—	519	7.5
Norman	75,926	469	6.2	—	—	158	2.1
Parkland	50,695	344	6.8	39	0.8	398	7.9
Westman	120,284	708	5.9	201	1.7	1,505[5]	12.5[5]
Winnipeg	603,536	3,148	5.2[3]	799	1.3	4,556	7.5
Manitoba	1,088,289	5,558[4]	5.1	1,101	1.0	8,281	7.6

[1]*M.H.S.C. Registered Population as of June 1, 1983.*

[2]*Based on rated capacity as at March 31, 1984.*

[3]*Actual beds available for Winnipeg residents were 4.03 per 1,000 population. The additional Winnipeg acute and extended beds, accounting for 22.7% of patient days, were used by rural residents and non-residents of the province.*

[4]*Although the table shows 5,558 rated beds, budget policies of M.H.S.C. are based upon approved utilization, resulting in 5,256 beds being funded.*

[5]*30.7% of Westman's beds are hostel as compared to 17.0% in all other regions combined.*

FIGURE V

In-Patient Hospital Days Per 1,000 Population by Region, 1982/83 and 1983/84

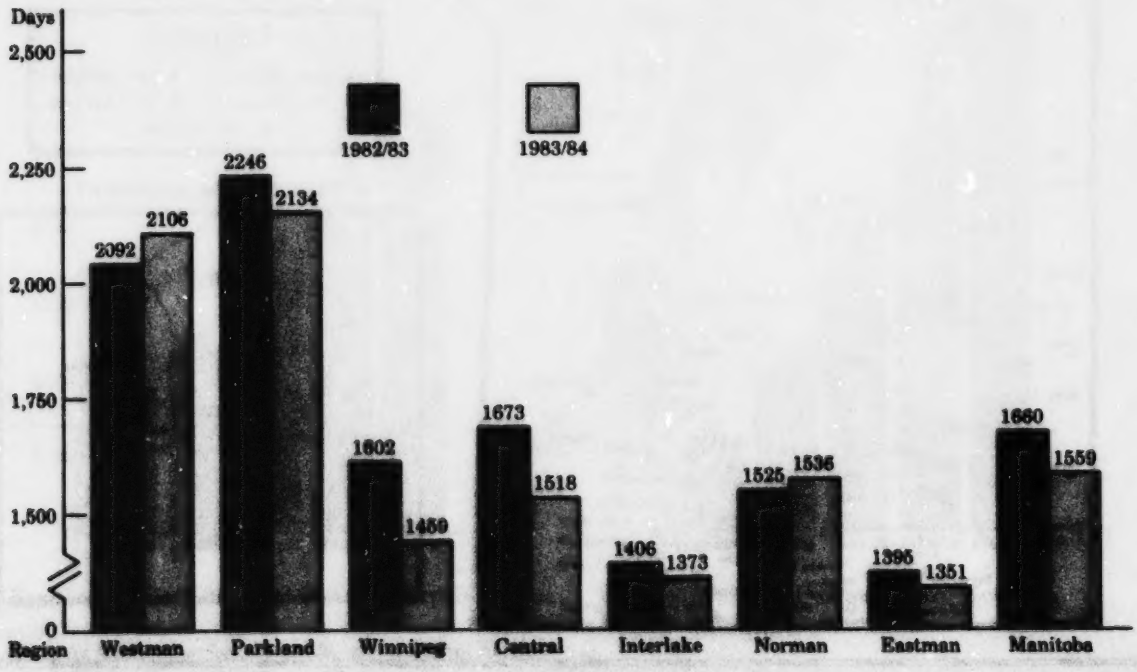


TABLE IV

Hospital Utilization and Rates Per 1,000 Population by Diagnostic Category, 1983/84.

DIAGNOSTIC CATEGORY[1]	IN-PATIENT CASES	PATIENT DAYS	LENGTH OF STAY (DAYS)	RATES PER 1,000 POPULATION[2] IN-PATIENT CASES	PATIENT DAYS
Infectious and Parasitic Diseases	2,504	27,178	10.9	2	25
Neoplasms	9,903	175,390	17.7	9	161
Endocrine, Metabolic Diseases	2,824	42,066	14.9	3	39
Diseases of Blood & Blood Forming Organs	1,021	11,932	11.7	1	11
Mental Disorders	6,637	142,128	21.4	6	131
Diseases of the Nervous System & Sense Organs	6,756	91,610	13.6	6	84
Diseases of the Circulatory System	18,064	308,724	17.1	17	284
Diseases of the Respiratory System	18,514	147,528	8.0	17	136
Diseases of the Digestive System	18,515	146,782	7.9	17	135
Diseases of the Genitourinary System	11,202	77,457	6.9	10	71
Pregnancy, Childbirth, Puerperium	24,475	101,576	4.2	23	93
Diseases of the Skin & Subcutaneous Tissue	2,387	24,842	10.4	2	23
Diseases of the Musculoskeletal System	7,341	88,301	12.0	7	81
Congenital Anomalies	1,236	9,344	7.6	1	9
Conditions Originating in the Perinatal Period	485	3,791	7.8	1	3
Symptoms, Signs, Ill-Defined Conditions	9,323	61,042	6.5	9	56
Injury & Poisoning	14,054	175,871	12.5	13	162
Supplementary Classification[3]	6,600	61,047	9.2	6	56
TOTAL	161,841	1,696,609	10.5	149	1,559

[1] *I.C.D.-9-C.M.*

[2] *Population as of June 1, 1983: 1,088,289.*

[3] *Factors Influencing Health Status and Contact with Health Services.*

TABLE V

Hospital Rated Bed Capacity and Net M.H.S.C. Payments 1982/83 and 1983/84.

HOSPITAL NAME	RATED BED CAPACITY 1982/83	RATED BED CAPACITY 1983/84	NET M.H.S.C. PAYMENTS 1982/83 $	NET M.H.S.C. PAYMENTS 1983/84 $
Active Treatment — Public General 15 Beds and Under:				
Benito	9	9	337,200	393,288
Boissevain	12	12	746,520	797,712
Cartwright	8	8	339,960	367,464
Elkhorn	8	8	302,160	331,968
Emerson	12	12	442,776	481,680
Erickson	14	14	477,680	525,648
Gillam	15	15	822,432	870,528
Hartney	9	9	328,440	361,944
Leaf Rapids	8	8	567,024	647,304
Manitou-Pembina	14	14	418,872	467,712
McCreary	13	13	531,720	592,992
MacGregor-North-Norfolk	6	6	452,562	387,240
Melita-Wilson Memorial	12	12	570,240	622,704
Notre Dame	10	10	429,960	462,864
Rossburn	10	10	540,910	525,744
St. Claude	12	12	530,088	571,632
Snow Lake	7	7	521,688	555,168
Vita	11	11	369,864	401,760
Wawanesa	10	10	471,480	518,832
Whitemouth	10	10	466,824	544,440
Sub-Total	210	210	9,668,400	10,428,624
16 - 30 Beds:				
Arborg	18	16	669,432	1,006,032
Ashern-Lakeshore	16	16	764,664	788,880
Baldur	16	16	570,288	604,728
Beausejour	30	30	1,155,528	1,263,672
Birtle	19	19	823,296	892,584
Carberry-Fox Memorial	29	29	847,488	917,808
Carman	30	30	1,601,802	1,886,544
Crystal City	16	16	813,408	862,416
Deloraine	18	18	815,280	904,080
Erikadale-E.M. Crowe Memorial	17	17	746,088	790,680
Gilbert Plains	21	21	551,472	613,704
Gladstone - Seven Regions	25	20	704,592	767,568
Glenboro	19	19	569,664	613,401
Grandview	18	18	643,632	701,184
Hamiota	21	21	996,792	1,116,360
Killarney	26	26	1,359,144	1,461,168
Lynn Lake	25	25	1,024,512	1,112,976
Pinawa	17	17	683,304	754,896
Reston	17	17	497,208	555,024
Rivers-Riverdale	16	16	683,952	723,144
Roblin	25	25	1,135,008	1,222,560
St. Anne	18	21	983,352	1,486,224
St. Pierre-Desalaberry	19	19	783,528	850,704
Shoal Lake	23	23	789,288	894,840
Souris	30	30	1,430,352	1,588,008
Stonewall-Dr. Evelyn Memorial	18	18	873,888	954,888
Swan Lake	22	22	1,045,800	1,150,440
Teulon	20	20	1,319,832	1,396,440
Treherne-Victoria-South-Norfolk	18	18	772,776	851,904
Winnipegosis	18	18	737,352	853,032
Sub-Total	625	621	26,392,722	29,585,889

TABLE V ... Cont'd.

Hospital Rated Bed Capacity and Net M.H.S.C. Payments 1982/83 and 1983/84.

HOSPITAL NAME	RATED BED CAPACITY 1982/83	RATED BED CAPACITY 1983/84	NET M.H.S.C. PAYMENTS 1982/83 $	NET M.H.S.C. PAYMENTS 1983/84 $
31 - 60 Beds:				
Altona	32	32	1,120,848	1,229,040
Churchill Health Centre	31	31	2,333,784	2,590,056
Gimli-Johnson Memorial	45	45	1,571,688	1,691,784
Minnedosa	35	35	1,356,480	1,498,872
Morden[1]	48	48	3,161,616	3,459,120
Morris	52	52	1,445,332	1,606,680
Neepawa	38	38	1,390,704	1,512,480
Pine Falls	48	48	1,584,624	1,798,584
Russell	38	38	1,473,504	1,621,824
Virden	32	32	1,187,304	1,304,256
Winkler-Bethel	57	57	2,881,776	3,156,600
Sub-Total	456	456	19,507,660	21,469,296
61 - 125 Beds:				
Dauphin[1]	104	104	5,784,816	6,590,232
Flin Flon	100	100	2,937,456	3,241,224
Portage General[1]	104	104	5,782,488	6,423,936
Ste. Rose	68	68	2,619,192	2,930,784
Selkirk	77	75	4,227,384	6,712,560
Steinbach-Bethesda[1]	65	65	3,195,336	3,507,432
Swan River[1]	68	68	4,276,296	4,696,416
The Pas-St. Anthony's	112	112	6,215,760	6,752,808
Thompson	100	100	6,608,496	7,250,448
Sub-Total	798	796	41,647,224	48,105,840
Over 125 Beds:				
Brandon[1]	232	232	23,560,032	25,685,712
Concordia[1]	132	132	10,689,624	11,696,208
Grace-Salvation Army	302	322	23,705,760	27,124,416
Health Sciences Centre	1,190	1,173	132,804,912	151,072,896
Misericordia	409	409	28,463,208	31,397,592
St. Boniface[1]	624	624	76,009,608	88,996,200
Seven Oaks[1]	216	216	22,694,538	27,243,424
Victoria	252	252	19,339,776	21,554,544
Sub-Total	3,357	3,360	337,267,458	384,770,992
TOTAL ALL PUBLIC GENERAL HOSPITALS	5,446	5,443	434,483,464	494,360,641
Specialty Hospital:				
Rehabilitation Centre for Children	20	20	1,330,392	1,504,429
Federal Hospitals:				
Deer Lodge	151	—	6,888,193	519,400
Gypsumville	—	—	5,035	3,008
Hodgson-Percy E. Moore	16	16	321,828	512,499
Norway House	16	16	384,247	440,848
Bloodvein N.S.	2	2	3,482	2,181
Berens River N.S.	6	6	5,217	8,580
Brochet N.S.	3	3	1,473	992
Cross Lake N.S.	4	4	14,522	11,986
Garden Hill N.S.	3	3	2,727	3,732
God's Lake N.S.	4	4	8,065	11,336

TABLE V ... Cont'd.

Hospital Rated Bed Capacity and Net M.H.S.C. Payments 1982/83 and 1983/84.

HOSPITAL NAME	RATED BED CAPACITY 1982/83	RATED BED CAPACITY 1983/84	NET M.H.S.C. PAYMENTS 1982/83 $	NET M.H.S.C. PAYMENTS 1983/84 $
Federal Hospitals Cont'd:				
Lac Brochet N.S.	2	2	—	936
Little Grand Rapids N.S.	4	4	2,541	2,229
Nelson House N.S.	4	4	7,877	18,711
Oxford House N.S.	3	3	15,172	12,138
Poplar River N.S.	4	4	2,211	3,375
Pukatawagan N.S.	4	4	1,043	4,765
Red Sucker Lake N.S.	2	2	1,363	1,796
Ste. Theresa N.S.	3	3	4,496	5,733
Shamatawa N.S.	4	4	4,983	4,205
South Indian Lake N.S.	6	6	1,096	3,130
Split Lake N.S.	4	4	1,028	8,219
Wassagamack N.S.	1	1	2,752	3,458
Sub-Total	246	95	7,679,351	1,583,257
TOTAL ALL ACTIVE TREATMENT HOSPITALS	5,712	5,558	443,493,207	497,448,327
Extended Treatment Hospitals:				
Brandon-Assiniboine	201	201	—	—
Dauphin	20	20	—	—
Deer Lodge	120	94	—	—
Morden	23	23	—	—
Portage	27	27	—	—
St. Boniface	188	188	—	—
Seven Oaks	116	116	—	—
Steinbach	12	12	—	—
Swan River	19	19	—	—
Winnipeg Municipal	401	401	17,080,320	18,647,376
TOTAL ALL EXTENDED TREATMENT HOSPITALS	1,127	1,101	17,080,320	18,647,376
Other Health Facilities:				
Eden Mental Health Centre	—	—[3]	—	1,755,912
Manitoba Adolescent Treatment Centre	—	—	—	102,450
Manitoba Cancer Treatment and Research Foundation	—	—	5,155,896	5,798,904
Camp Shilo	—	—	20,458	22,254
Westman Laboratory	—	—	3,498,000	3,979,202
Red Cross Blood Transfusion	—	—	4,836,821	5,272,246
Cadham Provincial Laboratory	—	—	3,550,355	4,150,817
Out-of-Province Payments	—	—	8,711,583	9,393,402
Sanatorium Board of Manitoba	—	—	25,000	25,000
Sub-Total	—	—	25,798,113	30,500,187
TOTAL ALL FACILITIES	6,839	6,659	486,371,640[2]	546,595,890[2]

[1]M.H.S.C. Payments include acute and extended treatment.

[2]The difference between net M.H.S.C. payments and hospital expenditures per Table II represents year end accruals and sundry adjustments.

[3]The Eden Mental Health Centre has a rated bed capacity of 40 beds; this number is not included in the Commission's figures.

MANITOBA
PERSONAL CARE HOMES
MARCH 1984
Legend
16-30 beds
61-125 beds
31-60 beds
over 125 beds
WINNIPEG
34 Personal Care Homes
representing 4,556 rated beds
were in operation as of
March 31, 1984

TABLE VI

Personal Care Home Residents by Age, Sex and Level of Care, March 31, 1984.

AGE GROUP AND SEX		HOSTEL CARE LEVEL 1	PERSONAL CARE LEVEL 2	EXTENDED CARE LEVEL 3	EXTENDED CARE LEVEL 4	TOTAL	PERCENT
Under 65	M	23	74	69	46	212	2.6
Under 65	F	15	66	80	61	222	2.7
65 - 69	M	20	59	53	29	161	2.0
65 - 69	F	16	76	44	42	178	2.2
70 - 74	M	38	117	79	48	282	3.5
70 - 74	F	49	133	117	78	377	4.6
75 - 79	M	61	148	129	75	413	5.1
75 - 79	F	98	289	230	124	741	9.1
80 - 84	M	86	180	160	85	511	6.3
80 - 84	F	171	483	340	200	1,194	14.6
85+	M	214	383	282	124	1,003	12.3
85+	F	426	1,108	754	581	2,869	35.0
TOTAL		1,217	3,116	2,337	1,493	8,163	
PERCENT		14.9	38.2	28.6	18.3	100.0	100.0

TABLE VII

Personal Care Home Rated Bed Capacity and Net M.H.S.C. Payments by Health Region, 1982/83 and 1983/84.

PERSONAL CARE HOME NAME	RATED BED CAPACITY As at March 31 1982/83	RATED BED CAPACITY As at March 31 1983/84	NET M.H.S.C. PAYMENTS 1982/83 $	NET M.H.S.C. PAYMENTS 1983/84 $
Central Region:				
Altona & District, Altona	25	25	425,016	472,416
Boyne Lodge, Carman	70	70	998,749	1,140,927
The Ebenezer Home, Altona	46	46	361,752	501,912
Foyer Notre Dame, Notre Dame de Lourdes	65	65	943,776	1,024,680
Holiday Retreat, Portage	25	25	280,877	328,668
Lions Prairie Manor, Portage	151	151	2,031,111	2,195,363
MacGregor P.C.H., MacGregor	20	20	428,340	422,904
Manoir de St. Claude Inc., St. Claude	18	18	409,341	443,653
Morris Eventide Home, Morris	26	26	206,274	225,876
Red River Valley Lodge, Emerson	20	20	387,240	410,904
Red River Valley Lodge, Morris	40	40	628,516	677,688
Salem Home, Winkler	118	118	1,565,865	1,797,096
Tabor Home, Morden	60	60	759,388	835,107
Third Crossing Manor, Gladstone	50	50	689,033	755,410
Tiger Hills Manor, Treherne	22	22	409,636	447,822
Sub-Total	756	756	10,524,914	11,680,426
Eastman Region:				
Bethesda, Steinbach	60	60	853,482	941,958
Eastgate Lodge, Beausejour	60	60	969,431	1,064,419
Manoir St. Pierre, St. Pierre Jolys	16	16	301,699	334,092
Menno Home for the Aged, Grunthal	41	40	186,804	346,500
Rest Haven, Steinbach	66	66	648,464	720,648
St. Adolphe N. H., St. Adolphe	42	42	501,542	561,446
Shevchenko Senior Citizens Home, Vita	30	30	511,177	581,360
Villa Youville, Ste. Anne	75	75	949,156	1,051,017
Sub-Total	390	389	4,921,755	5,601,440
Interlake Region:				
Betel Foundation, Gimli	95	95	1,027,236	1,138,058
Betel Foundation, Selkirk	94	94	1,199,032	1,329,038
Goodwin Lodge, Teulon	20	20	432,432	469,836
Lakeshore District Health System, Ashern	20	20	458,364	406,260
Lakeshore District Health System, Eriksdale	20	20	432,788	419,700
Lakeshore District Health System, Lundar (opened November, 1982)	20	20	259,555	600,219
Pioneer Health Services, Arborg	40	40	711,240	714,720
Red River Place, Selkirk	104	104	1,883,690	2,079,347
Rosewood Lodge, Stonewall	30	30	505,988	596,160
Tudor House, Selkirk	76	76	1,242,172	1,366,141
Sub-Total	519	519	8,152,497	9,119,479
Norman Region:				
Flin Flon P.C., Flin Flon	30	30	664,464	724,396
Northern Lights Manor, Flin Flon	30	30	285,558	318,272
Pinaow-Wachi, Norway House	26	26	110,941	96,408
St. Paul's Residence, The Pas	72	72	1,306,591	1,487,952
Sub-Total	158	158	2,367,554	2,627,028

TABLE VII ... Cont'd.

Personal Care Home Rated Bed Capacity and Net M.H.S.C. Payments by Health Region, 1982/83 and 1983/84.

PERSONAL CARE HOME NAME	RATED BED CAPACITY 1982/83 As at March 31	RATED BED CAPACITY 1983/84 As at March 31	NET M.H.S.C. PAYMENTS 1982/83 $	NET M.H.S.C. PAYMENTS 1983/84 $
Parkland Region:				
Dauphin P.C.H., Dauphin	65	65	1,340,064	1,474,928
Dr. Gendreau Memorial Home, Ste. Rose	40	40	601,752	652,182
Grandview P.C.H., Grandview	40	40	685,797	755,033
McCreary-Alonsa P.C.H., McCreary	20	20	424,607	463,092
St. Paul's Home, Dauphin	70	70	1,146,959	1,293,967
Roblin District P.C.H., Roblin	30	30	525,074	566,833
Swan River Valley Lodge, Swan River	53	53	340,793	365,597
Swan River Valley P.C.H., Swan River	60	60	969,361	1,093,907
Winnipegosis-Mossey River, Winnipegosis	20	20	474,864	493,704
Sub-Total	398	398	6,509,271	7,159,243
Westman Region:				
Baldur Manor P.C.H., Baldur	20	20	476,527	486,153
Bayside P.C.H., Killarney	30	30	564,900	595,371
Birtle P.C.H., Inc., Birtle	20	20	391,169	413,862
B.M.W. Health Facilities, Boissevain	20	20	421,726	466,348
Bren-Del-Win Lodge, Deloraine	30	30	291,364	321,388
Carberry P.C.H., Carberry	30	30	464,760	509,760
Central Park Lodge, Brandon	89	89	1,328,208	1,452,009
Cornwallis N.H., Brandon	22	22	249,143	270,131
Deloraine & District P.C.H., Deloraine	16	16	354,312	386,692
Eastview Lodge, Neepawa	125	125	1,544,861	1,713,289
Fairview Home, Brandon	264	264	2,448,592	2,689,388
Glenboro P.C.H., Glenboro (opened February 15, 1984)	—	20	—	234,342
Glenboro Senior Citizens Home, Glenboro	16	—	194,199	—
Hamiota P.C.H. Inc., Hamiota	30	30	572,856	631,556
Hillcrest Place, Brandon	100	100	1,465,774	1,587,209
International N.H., Brandon	65	65	891,970	961,327
Lakeview Senior Citizens Home, Killarney	43	43	312,672	363,055
Melita & Area P.C.H., Melita	20	20	389,333	425,552
Minnedosa & District P.C.H., Minnedosa	50	50	883,119	997,392
Morley House, Shoal Lake	40	40	608,865	676,105
Osborne Home, Neepawa	24	24	164,043	214,523
Prairie View Lodge, Pilot Mound	30	30	254,587	292,158
Riverdale P.C.H., Rivers	20	20	420,456	447,936
Rock Lake P.C.H., Pilot Mound	24	24	581,798	627,236
Rossburn P.C.H., Rossburn (opened May 1982)	20	20	464,623	501,402
Russell & District P.C.H., Russell	40	40	630,329	704,105
Salvation Army B. Booth, Brandon	24	31	134,381	277,957
Salvation Army Eventide, Brandon	42	—	191,102	124,129
Sandy Lake Home, Sandy Lake	36	36	541,153	590,671
The Sherwood, Virden	50	50	228,173	299,251
Souris District P.C.H., Souris	34	34	634,009	690,209
Sunset Haven, Brandon	22	22	249,836	276,846
Victoria Park Lodge, Souris	24	24	205,378	229,903
Wawanesa P.C.H., Wawanesa	20	20	450,797	483,035
Westman N.H., Virden	50	50	729,436	854,161
Westview Lodge, Boissevain	46	46	268,104	308,745
Sub-Total	1,536	1,505	20,002,555	22,093,196

TABLE VII ... Cont'd.

Personal Care Home Rated Rated Bed Capacity and Net M.H.S.C. Payments by Health Region, 1982/83 and 1983/84.

PERSONAL CARE HOME NAME	RATED BED CAPACITY 1982/83 As at March 31	RATED BED CAPACITY 1983/84 As at March 31	NET M.H.S.C. PAYMENTS 1982/83 $	NET M.H.S.C. PAYMENTS 1983/84 $
Winnipeg Region:				
Beacon Hill Lodge	175	175	2,818,857	3,094,748
Bethania Mennonite P.C.H.	100	100	1,734,994	1,908,288
Central Park Lodge, Poseidon Street	217	217	3,212,347	3,527,802
Central Park Lodge, Edmonton Street	277	277	4,182,843	4,456,640
Conquist N.H.	64	64	1,037,212	1,144,388
Convalescent Home	84	84	1,270,007	1,406,711
Deer Lodge (opened April, 1983)	—	185	—	3,513,768
Donwood Manor	81	81	1,293,028	1,406,655
Foyer St. Boniface	70	70	1,049,691	1,122,795
Golden Door Geriatric Centre	78	78	1,072,245	1,204,074
Golden West Centennial Lodge	91	91	715,164	764,099
Heritage Lodge N.H.	86	86	1,407,748	1,553,208
Holiday Haven N.H.	155	155	2,402,183	2,590,771
Holy Family N.H.	284	284	5,223,139	5,561,004
Kiwanis Centre for the Deaf	22	22	425,150	484,262
Lions Manor	135	135	811,040	859,332
Luther Home	80	80	1,211,244	1,311,605
Manitoba Oddfellows Home	57	57	316,273	343,002
Maples P.C.H. Limited	200	200	3,595,499	3,944,506
Meadowood Manor	90	90	1,346,053	1,451,349
Metro Kiwanis Courts	47	47	161,771	201,543
The Middlechurch Home	212	212	3,048,778	3,310,113
Nightingale N.H.	20	20	255,980	263,156
Oakview Place	244	244	3,705,944	4,114,316
Oddfellows & Rebekahs P.C.H. Inc.	90	90	1,451,174	1,611,247
Park Manor P.C.H.	100	100	1,579,953	1,740,361
St. Joseph's Residence	100	100	1,805,138	1,910,801
St. Norbert N.H.	91	91	1,514,097	1,652,678
The Sharon N.H.	208	208	2,777,231	3,122,579
Tache Nursing Centre	320	320	6,744,936	7,258,056
Tuxedo Villa	213	213	3,125,043	3,409,786
Vista Park Lodge	100	100	1,731,869	1,939,258
West Park Manor	150	150	2,232,169	2,444,015
Winnipeg Presbytery Society	130	130	1,550,309	1,692,814
Sub-Total	4,371	4,556	66,809,109	76,319,730
TOTAL ALL PERSONAL CARE HOMES	8,128	8,281	119,287,655[1]	134,600,542[1]

[1]The difference between net M.H.S.C. payments and Personal Care Home expenditures per Table II represents year end accruals and sundry adjustments.

TABLE VIII

Number of Health Practitioners and Population Per Practitioner by Health Region, 1983/84.

HEALTH REGION	POPULATION[1]	PRACTITIONERS WHO RECEIVED PAYMENT IN EXCESS OF $30,000.00					
		PHYSICIANS		CHIROPRACTORS		OPTOMETRISTS	
		NUMBER	POPULATION PER PRACT.	NUMBER	POPULATION PER PRACT.	NUMBER	POPULATION PER PRACT.
Central	91,689	49	1,871	8	11,461	6	15,282
Eastman	77,257	43	1,797	5	15,451	2	38,629
Interlake	68,902	36	1,914	3	22,967	3	22,967
Norman	75,926	48	1,582	2	37,963	2	37,963
Parkland	50,695	29	1,748	3	16,898	3	16,898
Westman	120,284	118	1,019	7	17,183	10	12,028
Winnipeg	603,536	945	639	52	11,606	39	15,475
Manitoba	1,088,289	1,268	858	80	13,604	65	16,743

[1]*M.H.S.C. Registered Population as of June 1, 1983.*

FIGURE VI

Medical Services Per Capita Cost By Region, 1982/83 and 1983/84

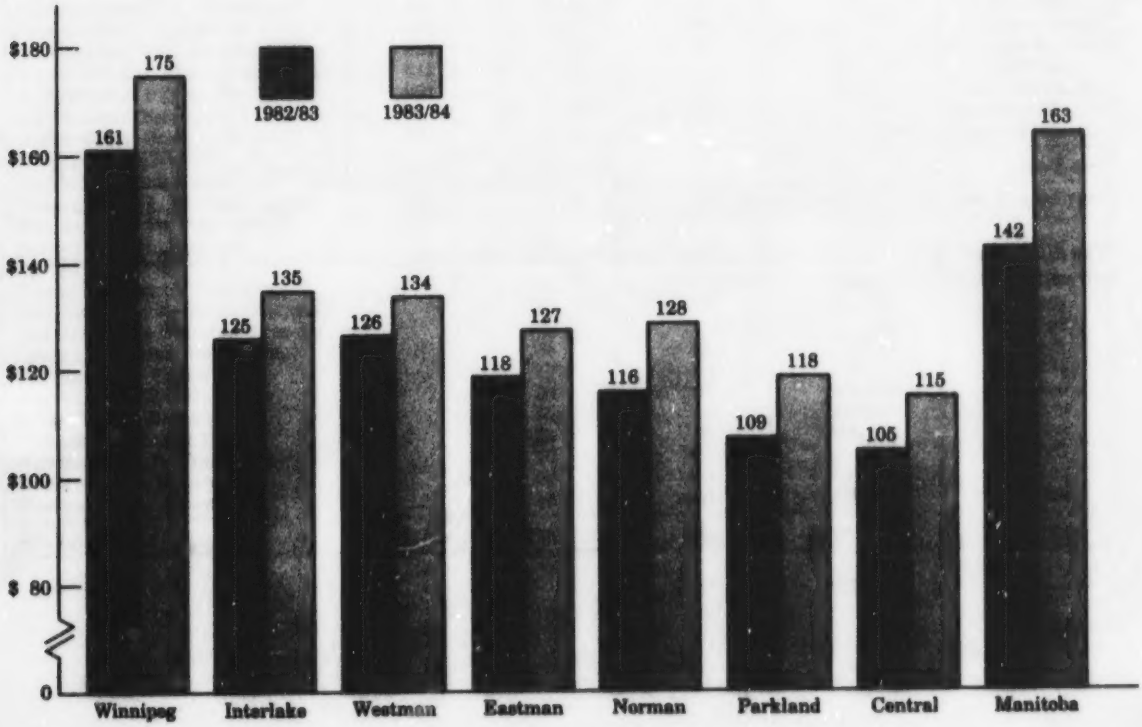


TABLE IX

Medical Services and Cost by Diagnostic Category, 1983/84.

DIAGNOSTIC CATEGORY[1]	NUMBER OF SERVICES	COSTS ($000's)	PERCENT DISTRIBUTION	
			SERVICES	COSTS
Infectious and Parasitic Diseases	250,647	2,802	2.1	1.7
Neoplasms	328,574	6,320	2.7	3.8
Endocrine, Metabolic Diseases	436,989	4,602	3.6	2.7
Diseases of Blood and Blood Forming Organs	134,204	1,352	1.1	0.8
Mental Disorders	929,638	11,530	7.6	6.9
Diseases of the Nervous System and Sense Organs	839,858	13,551	6.9	8.1
Diseases of the Circulatory System	1,112,107	15,361	9.1	9.2
Diseases of the Respiratory System	1,144,917	14,715	9.4	8.8
Diseases of the Digestive System	533,004	11,482	4.4	6.9
Diseases of the Genitourinary System	815,706	12,507	6.7	7.5
Pregnancy, Childbirth, Puerperium	123,880	6,712	1.0	4.0
Diseases of the Skin and Subcutaneous Tissue	514,648	6,421	4.2	3.8
Diseases of the Musculoskeletal System	710,377	10,053	5.8	6.0
Congenital Anomalies	37,125	1,115	0.3	0.7
Conditions Originating in the Perinatal Period	28,932	440	0.2	0.3
Symptoms, Signs, Ill-Defined Conditions	917,387	12,115	7.5	7.3
Injury and Poisoning	764,439	12,011	6.3	7.2
Factors Influencing Health Status[2]	1,802,743	17,790	15.0	10.6
Without Diagnosis	739,999	6,138	6.1	3.7
Total[3]	12,165,174	167,017	100.0	100.0

[1] *I.C.D.-9-C.M.*

[2] *Factors influencing Health Status and Contact with Health Services, includes general medical examinations and special investigations.*

[3] *Excludes Out-of-Province Medical as well as all Optometric, Oral, Dental and Chiropractic services and costs.*

FIGURE VII

Medical Services Per Capita Cost by Age Group and Sex, 1983/84

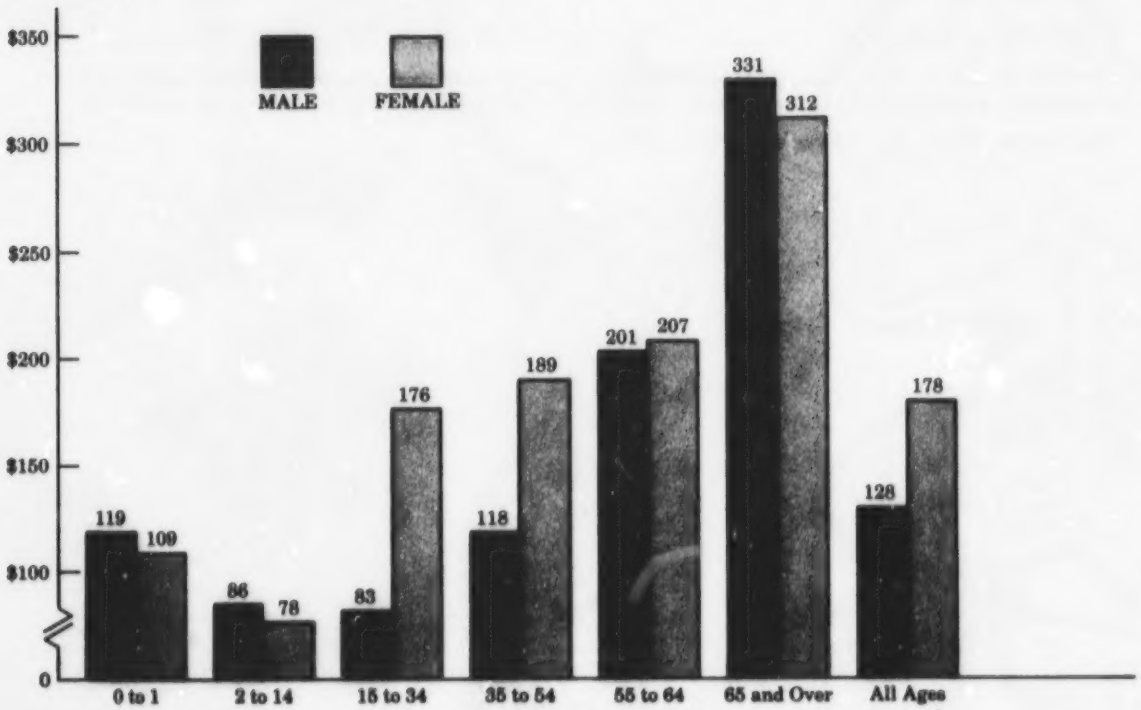


TABLE X

Average Health Services Cost Per Patient By Type of Practice, 1979/80 - 1983/84.

TYPE OF PRACTICE	1979/80[1] $	1980/81 $	1981/82 $	1982/83 $	1983/84 $
Internal Medicine	52.63	54.44	50.36	54.59	58.93
Internal Medicine — Neurology	54.61	56.28	61.34	67.01	68.32
Paediatrics	30.08	34.45	41.29	47.57	49.79
Psychiatry	171.67	204.75	254.60	280.77	300.89
Surgery — General	71.00	80.82	95.05	107.71	116.86
— Thoracic & Cardiovascular	247.04	263.07	300.88	370.03	412.74
— Plastic	95.47	103.27	119.51	135.33	132.26
— Urological	91.57	97.84	119.53	126.54	134.29
— Orthopaedic	61.39	66.93	78.47	85.48	90.23
— Neurological	100.55	123.07	146.62	170.79	212.93
Ophthalmology	29.78	33.12	41.35	48.05	53.45
Otorhinolaryngology	45.08	44.70	53.00	59.48	61.42
Dermatology	26.46	31.43	37.42	42.25	43.39
Radiology	12.46	13.17	16.21	18.83	20.20
Pathology	21.30	23.36	29.37	32.60	31.98
Obstetrics & Gynaecology	57.03	61.54	73.33	83.42	89.37
Anaesthesia	56.94	62.52	77.62	86.81	89.44
General Practice — Urban	32.67	35.94	41.94	47.51	47.67
— Rural	36.82	40.85	46.93	51.29	53.44
Physical Medicine	70.39	81.32	93.00	101.52	91.51
Oral, Dental, Periodontal Surgery	147.75	173.96	185.17	206.04	218.10
Optometric	14.35	17.40	18.85	22.23	22.96
Chiropractic	35.60[2]	37.05	38.30	43.96	47.92

[1]The 1979/80 data are not completely comparable to the data for other years because in 1979/80 payments to Physicians were accelerated by approximately two weeks through a change in claims processing procedures.

[2]Includes retroactive payment made in March 1981.

TABLE XI

Medical Cost and Percent Distribution by Type of Service, 1982/83 and 1983/84.

TYPE OF SERVICE	1982/83 COST $	1982/83 PERCENT DISTRIBUTION	1983/84 COST $	1983/84 PERCENT DISTRIBUTION
Office Visits	64,112,828	41.7	69,086,700	41.4
Laboratory	16,666,210	10.8	18,752,332	11.2
Major Surgery	14,893,912	9.7	16,509,874	9.9
Other Diagnostic/Therapeutic Services	12,459,233	8.1	13,115,653	7.9
Consultations	10,477,135	6.8	11,642,646	7.0
Hospital Visits	8,939,272	5.8	9,297,729	5.6
Diagnostic Radiology	7,093,318	4.6	7,785,824	4.7
Anaesthesia	5,211,731	3.4	5,494,077	3.3
Obstetric Services	4,764,780	3.1	5,418,920	3.2
Special Visits	4,552,460	3.0	4,867,355	2.9
Minor Surgery	1,965,591	1.3	2,101,465	1.2
Surgical Assistance	1,790,535	1.2	2,036,369	1.2
Miscellaneous Services	758,481	0.5	908,020	0.5
TOTAL[1]	153,685,486	100.0	167,016,964	100.0

[1]*Excludes Out-of-Province Medical as well as Optometric, Oral, Dental and Chiropractic Services and Costs.*

TABLE XII

Average and Median Payments ($30,000 Gross) to Physicians by Specialty of Practice. Amounts Represent Gross Payments From M.H.S.C. From Which the Physicians Must Pay Overhead Costs, 1982/83 and 1983/84.

TYPE OF PRACTICE	NUMBER OF PHYSICIANS 1982/83	1983/84	AVERAGE PAYMENT[1] 1982/83 $	1983/84 $	MEDIAN PAYMENT[1] 1982/83 $	1983/84 $
Internal Medicine	117	117	110,070	115,250	92,260	101,090
Internal Medicine - Neurology	12	11	116,470	130,260	85,380	129,610
Paediatrics	57	57	117,920	127,800	121,030	126,170
Psychiatry	75	78	101,980	112,650	107,460	111,320
Surgery — General	67	73	130,340	129,730	132,820	123,790
— Thor. & Cardiovas.	11	11	187,370	205,060	184,360	245,200
— Plastic	8	8	174,190	192,760	156,500	175,680
— Urological	17	18	152,840	152,560	141,680	160,740
— Orthopaedic	28	29	139,990	144,770	147,530	134,470
— Neurological	4	5	104,780	106,000	115,280	124,450
Ophthalmology	27	29	144,350	145,450	115,790	114,580
Otorhinolaryngology	20	23	144,810	132,440	157,110	137,380
Dermatology	10	12	151,040	145,270	141,610	132,360
Radiology	39	42	142,100	142,000	—[3]	—[3]
Pathology	11	14[5]	—[4]	—[4]	—[4]	—[4]
Obstetrics & Gynaecology	53	57	134,580	139,940	124,420	132,500
Anaesthesia	57	57	91,950	98,860	—[3]	—[3]
General Practice — Urban[2]	354	377	94,840	97,420	90,800	93,510
— Rural	238	245	107,490	113,350	102,140	107,630
Physical Medicine	4	5	83,880	67,830	78,440	79,620
ALL PHYSICIANS	1,209	1,268	111,420	112,560	105,630	107,820

NOTE: Specialty of Practice is according to M.H.S.C. records as at March 31 each year.

[1](a) Includes payments issued directly to health practitioners, as well as payment to patients where the health practitioner has "opted-out" of the Plan. The Average Payments exclude remuneration from the University of Manitoba to geographic full-time clinical teaching staff. For Radiology the Average Payment represents professional services only and includes salary and contract payments made through hospitals, representing 64.5% of professional income in 1983/84. The average payment for Physical Medicine, Anaesthesia, and Psychiatry also includes payment made by hospitals. For health practitioners, (except Radiology, Physical Medicine, Psychiatry, and Anaesthesia) all other sources of income from hospital contracts uninsured services, non-residents and Worker's Compensation, etc. are excluded. Payments made for laboratory services to registered facilities are also excluded, as it is not possible to separate the technical and professional components.

(b) Average Payment reflects a 3.44% overall increase in the schedule of fees during 1983/84.

[2]General Practitioners in Brandon are included in G.P. Urban.

[3]Median not calculated because some hospital payments are allocated in bloc and not to the individual.

[4]Average and median are not calculated because it is not possible to segregate the technical and professional components.

[5]9 are registered as pathologists; the remaining 5 are registered as either internists or general practitioners, but their practice is primarily as directors of laboratories being recognized by the College of Physicians and Surgeons as specialists in laboratory medicine.

TABLE XIII

Average and Median Payments ($30,000 Gross) for Dental and Oral Surgery, Optometric and Chiropractic. Amounts Represent Payments From M.H.S.C. From Which the Practitioner Must Pay Overhead Costs, 1982/83 and 1983/84.

TYPE OF PRACTICE	NUMBER OF PRACTITIONERS 1982/83	1983/84	AVERAGE PAYMENT 1982/83 $	1983/84[1] $	MEDIAN PAYMENT 1982/83 $	1983/84[1] $
Dental & Oral Surgery	10	11	106,510	103,240	107,140	93,570
Optometric	60	65	56,050	56,660	49,070	49,850
Chiropractic	72	80	76,240	79,010	80,340	79,310

[1]*Average and Median Payments reflect increases of 3.44% to Dental and Oral Surgery, 2.74% to Optometric and 3.44% to Chiropractic, in their schedule of fees on April 1, 1983.*

TABLE XIV

Medical, Oral and Dental Surgery, Optometric and Chiropractic Services and Costs, 1982/83 and 1983/84.

TYPE OF PRACTICE	NUMBER OF SERVICES 1982/83	1983/84	PAYMENTS MADE DURING 1982/83 $	1983/84 $
Internal Medicine	871,669	852,236	13,531,888	14,420,919
Internal Medicine — Neurology	47,438	47,314	1,379,885	1,459,187
Paediatrics	545,267	563,835	7,063,509	7,695,435
Psychiatry	436,764	478,436	6,280,230	7,206,340
Surgery — General	301,104	292,776	9,037,065	9,622,766
— Thoracic & Cardiovascular	18,458	17,040	1,975,364	2,255,607
— Plastic	28,513	29,650	1,393,549	1,542,052
— Urological	68,109	65,176	2,621,132	2,746,160
— Orthopaedic	119,082	117,152	4,004,820	4,225,510
— Neurological	8,139	8,452	418,264	529,982
Ophthalmology	134,147	133,276	3,957,999	4,260,176
Otorhinolaryngology	125,631	120,846	2,921,819	3,023,344
Dermatology	121,687	119,167	1,510,411	1,569,584
Radiology (includes both technical and professional components of fee)	601,087	618,518	7,454,154	8,136,346
Pathology	2,681,785	2,776,111	15,268,469	17,055,032
Obstetrics and Gynaecology	277,217	290,267	7,264,241	8,069,002
Anaesthesia	61,925	65,244	3,786,638	4,115,606
General Practice — Urban[1]	2,972,731	3,159,896	35,763,813	39,207,460
— Rural	2,307,363	2,371,448	27,754,132	29,559,287
Physical Medicine	40,564	38,335	298,104	317,169
Sub-Total In-Province Medical Services	11,768,680	12,165,175	153,685,486	167,016,964
Out-of-Province Doctors	117,411	121,030	2,154,109	2,356,889
Out-of-Province Agreement	11,125	10,485	133,824	129,894
Total Medical Services	11,897,216	12,296,690	155,973,419	169,503,747
Oral and Dental Surgery	16,009	15,808	1,160,636	1,225,291
Optometry	173,904	180,270	3,625,938	3,910,259
Optometry Out-of-Province Agreement	126	148	2,715	3,353
Chiropractic	613,544	668,905	5,659,061	6,389,789
Chiropractic Out-of-Province Agreement	2,369	4,425	21,797	43,996
Total Other Health Services	805,952	869,556	10,470,147	11,572,688
TOTAL ALL SERVICES[2]	12,703,168	13,166,246	166,443,566[2]	181,076,435[2]

[1]General Practice Urban includes Brandon and Winnipeg.

[2]Figures include $1,366,233 for 1982/83 and $1,488,591 for 1983/84 which represent the value of services submitted by salaried physicians.

Financial Summary of Operations for the Year Ended March 31, 1984

Hospital Services

The Commission provides for all reasonable costs incurred by Manitoba hospitals in providing insured services to Manitoba residents. There are 101 hospitals in Manitoba that receive payments from the Commission; 20 are federal hospitals, 18 of which are northern nursing stations; and 81 are public general hospitals. Budget submissions from the public general hospitals are reviewed each year and rates of payment to all hospitals are established by regulation of the Commission. Total expenditures for hospitals for the year ended March 31, 1984 amounted to $539,299,000. These expenditures, together with comparable figures for the previous year, are summarized as follows:

	1984	1983
	(thousands of dollars)	
Public General Hospitals	$519,719	$461,768
Federal Hospitals	949	7,424
Contract Facilities and Red Cross Blood Transfusion Services	9,377	8,579
Hospitals Outside the Province	9,254	9,123
	$539,299	$486,894

During the year ended March 31, 1984 the average daily in-patient cost in a public general hospital in Manitoba was $280.05 compared to $251.25 for the previous year, an increase of 11.5%.

The increase for public general hospitals approximates $58.0 million. Of this increase, $47.2 million is due to increased salary and supply costs, and $10.8 million for new facility or program operating costs.

Medical and Other Health Services

Medical costs incurred by residents of Manitoba are financed by the Commission in accordance with rates set out in the M.H.S.C. Schedule of Benefits or on the basis of special arrangements approved by the Commission. Costs of chiropractic and optometric services, dental and oral surgery, and specific prosthetic and orthotic devices and services are covered as established in regulations under The Health Services Insurance Act.

A summary of expenditures for medical and other health services for the year ended March 31, 1984, together with comparable figures for the previous year, is as follows:

	1984	1983
	(thousands of dollars)	
Medical Services	$168,865	$157,653
Dental and Oral Surgery	1,225	1,161
Salary and Other Payments to Physicians	9,280	7,836
Total Medical Services	179,370	166,650
Optometric Services	3,936	3,721
Chiropractic Services	6,508	5,809
Prosthetic and Orthotic Devices	2,536	2,213
Total Other Health Services	12,980	11,743
Total Medical and Other Health Services	$192,350	$178,393

Personal Care Home Services

The Commission provides for reasonable costs incurred by Manitoba personal care homes in providing insured personal care services to Manitoba residents. The program includes the supplying of prescription drugs as a benefit to insured residents in personal care homes. Insured residents were required to pay an average residential charge of $12.72 per day during the year ending March 31, 1984. Residential charges during the year were as follows:

April 1, 1983	— $12.35
May 1, 1983	— $12.55
August 1, 1983	— $12.70
November 1, 1983	— $12.85
February 1, 1984	— $13.00

As at March 31, 1984 there were 8,281 beds included in the program (5,892 non-proprietary beds and 2,389 proprietary beds).

A summary of expenditures of the personal care home program for the year ended March 31, 1984 together with comparable figures for the previous year is as follows:

	1984	1983
	(thousands of dollars)	
Resident Services	$132,477	$115,479
Drug Costs	4,113	3,822
Adult Day Care	492	370
Therapy Services	1,493	1,431
	$138,575	$121,102

Program costs increased by $17.5 million. Of this increase, $13.8 million is due to increased salary and supply costs, and $6.5 million represents costs of facilities and programs initiated during the year ended March 31, 1984. These increased costs were offset in part by a $2.8 million increase in residential charges during the year.

Pharmacare

Costs of the universal pharmacare program for the year ended March 31, 1984 amounted to $21,493,000 compared with $17,249,000 in the previous year. The Manitoba Health Services Commission reimburses resident claimants for 80% of the cost of eligible prescription drugs in excess of $75.00 for residents under age 65 and in excess of $50.00 for residents age 65 and over.

Ambulance Program

Under this program, grants are made available for approved programs for capital costs of vehicles and communication equipment, for subsidizing operating costs, and for training programs.

The grants are made to municipalities on a per capita basis. In addition to the per capita grant, the Commission provides funds for the training of ambulance personnel. Total cost of the ambulance program for the year ended March 31, 1984 was $1,881,000 compared with $1,981,000 in the previous year.

Northern Patient Transportation Program

The purpose of this program is to finance (a) transportation costs for emergencies and urgent hospital-to-hospital transfers and (b) transportation costs for certain elective cases. These services are available to residents of Manitoba who are northern patients and require transportation for medical reasons from or within the following areas:

- North of the 53rd parallel from the Saskatchewan boundary to Lake Winnipeg and
- North of the 51st parallel from Lake Winnipeg to the Ontario boundary.

Costs of this program for the year ended March 31, 1984 amounted to $2,465,000 compared with $2,204,000 for the previous year.

Administrative Expenses

Administrative expenses of the Commission amounted to $13,111,000 for the year ended March 31, 1984 or 1.4% of the total expenditures, compared with $11,762,000 and 1.4% for the previous year.

Revenue

For the year ended March 31, 1984, the cost of insured health services was financed primarily through grants from the Provincial Consolidated Fund.

As in the previous year, federal contributions, pursuant to the provisions of The Federal-Provincial Fiscal Arrangements and Established Programs Financing Act, 1977, were not received by the Commission but were deposited directly into the Consolidated Fund of the Province of Manitoba.

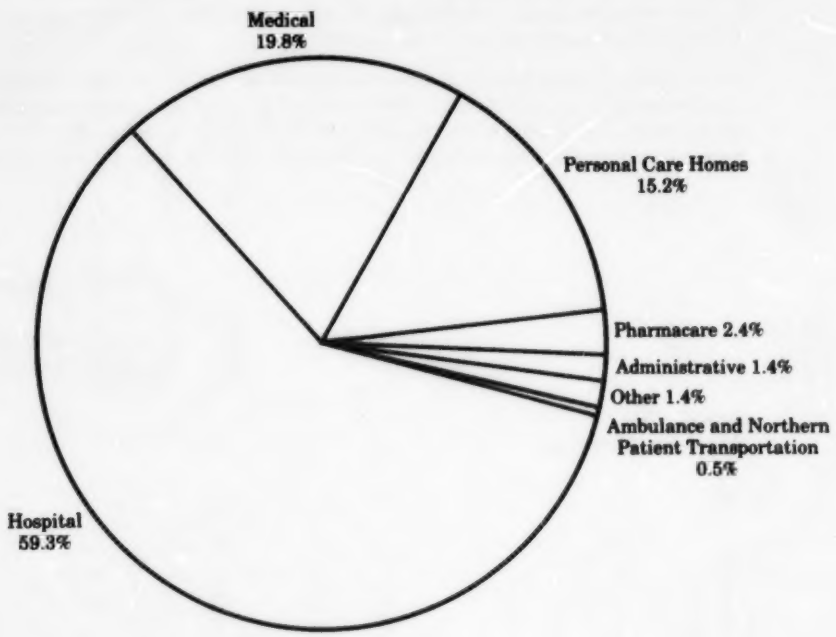
The total of all revenues of the Commission for the year ended March 31, 1984 is $909,225,000 compared with $820,574,000 for the previous year.

Working Capital

The financial operations of the Commission for the year ended March 31, 1984 resulted in an excess of revenue over expenditure of $51,000 which resulted in a closing working capital account of $994,000.

Following is a chart showing the Manitoba Health Services Commission's expenditures for the year ending March 31, 1984.

Expenditure



MANITOBA

PROVINCE OF MANITOBA
PROVINCIAL AUDITOR

Manitoba Health Services Commission
Report of the Provincial Auditor's Office

We have examined the financial statements, being Statements A, B, C and Schedule 1, of the Manitoba Health Services Commission for the fiscal year ended March 31, 1984. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the Commission as at March 31, 1984 and the results of its operations for the year then ended in accordance with the accounting policies stated in Note 1 to the financial statements applied on a basis consistent with that of the preceding year.

W. K. Ziprick, C.A.,
Provincial Auditor.

June 22, 1984,
Winnipeg, Manitoba.

Manitoba Health Services Commission
Balance Sheet
As at March 31, 1984
(With 1983 Figures for Comparison)

ASSETS

	1984	1983
	(thousands of dollars)	
Cash on hand and in bank, less outstanding cheques	$ (741)	$ 4,878
Funds on deposit, Government of the Province of Manitoba	42,773	37,697
Accounts receivable:		
Government of the Province of Manitoba	58	49
Other Provinces and Territories	4,002	3,141
Other	337	239
	4,397	3,429
Land, buildings, furniture and equipment at nominal value of one dollar (Note 1)	—	—
	46,429	46,004
Funds held in trust re debenture trust agreements (per contra) (Notes 2 & 3)	13,757	13,086
	$60,186	$59,090

LIABILITIES

	1984	1983
	(thousands of dollars)	
Accounts payable and accrued charges:		
Hospital and personal care home services:		
Liability for unreported claims	$ 1,718	$ 2,546
Estimated adjustment payments under section 87(2) of The Health Services Insurance Act and other costs, net	13,654	16,183
	15,372	18,729
Medical services claims payable	21,864	20,334
Pharmacare claims payable	5,772	3,856
Ambulance grants payable	295	252
Northern patient transportation claims payable	78	123
Other health services claims payable	1,580	1,460
General	474	307
	45,435	45,061
Working capital account, Statement C	994	943
	46,429	46,004
Funds held in trust re debenture trust agreements (per contra)	13,757	13,086
	$60,186	$59,090

The accompanying notes on pages 44 to 45 are an integral part of the financial statements.

Statement B

Manitoba Health Services Commission
Statement of Revenue and Expenditure

For the Year Ended March 31, 1984
(With 1983 Figures for Comparison)

	1984	1983
	(thousands of dollars)	
Revenue:		
Grants from the Government of the Province of Manitoba	$905,640	$817,922
Third party recoveries (Note 1)	3,571	2,630
Miscellaneous income	14	22
Total revenue	$909,225	$820,574
Expenditure:		
Hospital services:		
Hospitals within the Province	$530,045	$477,771
Hospitals outside the Province	9,254	9,123
	539,299	486,894
Medical services	179,370	166,650
Personal care home services	138,575	121,102
Pharmacare	21,493	17,249
Ambulance program	1,881	1,981
Northern patient transportation program	2,465	2,204
Other health services (Note 4)	12,980	11,743
Administrative expenses, Schedule 1	13,111	11,762
Total expenditure	$909,174	$819,585
Excess of revenue over expenditure, Statement C	$ 51	$ 989

The accompanying notes on pages 44 to 45 are an integral part of the financial statements.

Statement C

Manitoba Health Services Commission
Statement of Working Capital Account

For the Year Ended March 31, 1984
(With 1983 Figures for Comparison)

	1984	1983
	(thousands of dollars)	
Balance, beginning of year	$ 943	$ 549
Add: Excess of revenue over expenditure, Statement B	51	989
	994	1,538
Deduct: Adjustment of accounts receivable from the Government of Canada to reflect the most current information available	—	595
Balance, end of year, Statement A	$ 994	$ 943

The accompanying notes on pages 44 to 45 are an integral part of the financial statements.

Schedule 1

Manitoba Health Services Commission
Schedule of Administrative Expenses

For the Year Ended March 31, 1984
(With 1983 Figures for Comparison)

	1984	1983
	(thousands of dollars)	
Salaries and employee benefits	$ 9,426	$ 8,876
Office equipment (Note 5)	1,430	467
Professional services	478	508
Stationery and office supplies	387	460
Postage, express and delivery	344	373
Pension payments on behalf of employees (Note 1)	208	152
Grant in lieu of realty taxes	154	148
Health and post-secondary education tax levy	137	105
Maintenance of land, building and office equipment	135	121
Telephone	129	117
Utilities	90	76
Travel	87	84
Bank charges	83	79
Miscellaneous	11	20
Commissioners' remuneration	7	40
Building renovations	4	71
Publicity	1	65
	$ 13,111	$ 11,762

The accompanying notes on pages 44 to 45 are an integral part of the financial statements.

Manitoba Health Services Commission
Notes to the Financial Statements

March 31, 1984

NOTE 1. SIGNIFICANT ACCOUNTING POLICIES

(a) The financial statements have been prepared on an accrual basis of accounting except for the following:

(i) PENSION

In accordance with the provisions of the Manitoba Civil Service Superannuation Act, the Commission contributes 50% of the pension disbursements made to retired employees. Such payments are charged to expense as incurred and a provision is not made in the accounts to fund current or past service obligations of the Commission to the Civil Service Superannuation Fund. On the basis of an actuarial report, the unfunded provision for the Commission's employees amounted to $8,671,000 as at December 31, 1983 ($7,469,000 as at December 31, 1982).

(ii) THIRD PARTY RECOVERIES

Third party recoveries are recorded on a cash basis.

(iii) INVENTORIES

Purchases of supplies are charged to operating expenditures as incurred. The Commission does not record the value of supplies on hand as an asset.

(iv) LAND, BUILDINGS, FURNITURE AND EQUIPMENT

Land, buildings, furniture and equipment are charged to operating expenditures in the year of acquisition. As at March 31, 1984, the Commission owns the following fixed assets:

1. Administration building, land, furniture and equipment.
2. Land and buildings of the Rehabilitation Centre for Children, Inc.
3. Land on which the building owned by the Manitoba Adolescent Treatment Centre Inc. is located.
4. Land, buildings and equipment of the Deer Lodge Centre Inc.
5. Diagnostic equipment located in the provincial laboratory and x-ray units throughout the Province.

(b) RESTATEMENT OF FIGURES

Where figures for the current fiscal year have been presented in a format different from that of the previous year, the figures for the previous year have been restated in order to preserve comparability.

NOTE 2. FUNDS HELD IN TRUST RE DEBENTURE TRUST AGREEMENTS

Funds on deposit as at March 31:

	1984	1983
	(thousands of dollars)	
Bank	$ 11,391	$ 11,161
Government of the Province of Manitoba	2,366	1,925
	$ 13,757	$ 13,086

NOTE. 3 CAPITAL FINANCING

Hospitals and personal care homes have obtained financing for capital construction by issuing debentures, or arranging for mortgages or long-term loans. The Hospital Capital Financing Authority, which was established in 1972, approves the issue of all securities to finance these capital expenditures and assists in obtaining an orderly market for the sale of the securities.

Funds for servicing approved capital debt incurred for the construction and acquisition of facilities for the provision of insured services are included in the Commission's expenditure. For the year ended March 31, 1984 the amount related to interest and principal repayment included in the expenditures for hospital and personal care home services shown on Statement B is $39,836,000 ($33,517,000 for the year ended March 31, 1983).

In accordance with arrangements with the hospitals and personal care homes, the Commission either holds in trust or disburses to the Province and other trustees, out of funds payable by it to these facilities, sufficient moneys to meet the interest and principal payment and sinking fund provisions for debentures.

At March 31, 1984 the amount of $13,757,000 ($13,086,000 as at March 31, 1983) shown on the balance sheet was being held by the Commission to meet future obligations for:

	1984	1983
	(thousands of dollars)	
Principal and interest payments to the debenture Trustees payable in the next fiscal year	$ 10,417	$ 10,729
Sinking funds for the retirement of debentures	3,340	2,357
	$ 13,757	$ 13,086
Sinking funds for the retirement of debentures held by another Trustee at March 31	$ 4,825	$ 1,887

As at March 31, the approved outstanding capital debt of hospitals and personal care homes was:

	1984	1983
	(thousands of dollars)	
Canadian Dollars		
Debentures:		
Hospitals	$146,938	$146,175
Less, accumulated sinking funds	8,165	4,244
	138,773	141,931
Personal care homes	10,402	10,700
	149,175	152,631
Mortgages:		
Personal care homes(1)	52,295	51,316
Other:		
Hospitals	22,259	13,682
Personal care homes	3,743	3,978
	26,002	17,660
	$227,472	$221,607
United States Dollars		
Debentures:		
Hospitals	$ 11,950	$12,675

(1) Includes $14,854,000 ($14,012,000 as at March 31, 1983) National Housing Act mortgages which are subsidized by the Canada Mortgage and Housing Corporation.

In addition to the approved outstanding debt, lines of credit up to $99,435,000 ($36,830,000 as at March 31, 1983) have been approved to finance capital projects currently in process. On completion of these projects, the borrowings will be converted to long-term debt.

NOTE 4. OTHER HEALTH SERVICES

This group of expenditures includes:

	1984	1983
	(thousands of dollars)	
Optometric	$ 3,936	$ 3,721
Chiropractic	6,508	5809
Prosthetic and Orthotic	2,536	2,213
	$ 12,980	$ 11,743

NOTE 5. OFFICE EQUIPMENT

Effective April 1, 1983 a new contract for computer services was negotiated with Manitoba Data Services. This accounts for the increase in office equipment over the previous year's expenditure.